### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

### Part 1: Identify Yourself

|    |   | About Debtor 1:                                | About Debtor 2 (Spouse Only in a Joint Case): |
|----|---|--|---|
| 1. | Your full name  |  |   |
|    | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). | Johnny First Name  E Middle Name               | First Name  Middle Name                       |
|    |   | Barnes   |   |
|    | Bring your picture identification to your meeting   | Last Name                                      | Last Name                                     |
|    | with the trustee.   | Suffix (Sr., Jr., II, III)                     | Suffix (Sr., Jr., II, III)                    |
| 2. | All other names you   |  |   |
|    | have used in the last 8 years   | First Name                                     | First Name                                    |
|    | Include your married or   | Middle Name                                    | Middle Name                                   |
|    | maiden names.   | Last Name                                      | Last Name                                     |
| 3. | Only the last 4 digits of your Social Security  | xxx - xx - <u>0</u> <u>8</u> <u>6</u> <u>6</u> | xxx - xx                                      |
|    | number or federal<br>Individual Taxpayer  | OR   | OR  |
|    | Identification number   | 9xx - xx -                                     | 9xx - xx -                                    |

(ITIN)

| Del | btor 1 <b>Johnny E Barnes</b>                                |  | Case number (if known)  |  |
|-----|--|--|---|--|
|     |  | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case):   |  |
| 4.  | Any business names<br>and Employer<br>Identification Numbers | ✓ I have not used any business names or EIN  | s.   I have not used any business names or EINs.  |  |
|     | (EIN) you have used in<br>the last 8 years                   | Business name  | Business name   |  |
|     | Include trade names and                                      | Business name  | Business name   |  |
|     | doing business as names                                      | Business name  | Business name   |  |
|     |  | EIN  | EIN   |  |
|     |  | <b>-</b>   | <u></u>   |  |
| 5.  | Where you live   |  | If Debtor 2 lives at a different address:   |  |
|     |  | 120 Bellaire   |   |  |
|     |  | Number Street  | Number Street   |  |
|     |  |  |   |  |
|     |  | San Augustine         TX         75972           City         State         ZIP Code   | City State ZIP Code   |  |
|     |  | San Augustine  |   |  |
|     |  | County   | County  |  |
|     |  | If your mailing address is different from<br>the one above, fill it in here. Note that the<br>court will send any notices to you at this<br>mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address. |  |
|     |  | PO Box 523   |   |  |
|     |  | Number Street  | Number Street   |  |
|     |  | P.O. Box   | P.O. Box  |  |
|     |  | San Augustine TX 75972   |   |  |
|     |  | City State ZIP Code  | City State ZIP Code   |  |
| 6.  | Why you are choosing this district to file for               | Check one:   | Check one:  |  |
|     | bankruptcy   | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.   | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                              |  |
|     |  | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)  | I have another reason. Explain. (See 28 U.S.C. § 1408.)   |  |
| P   | Part 2: Tell the Court A                                     | Sbout Your Bankruptcy Case   |   |  |
| 7.  | The chapter of the Bankruptcy Code you                       | Check one: (For a brief description of each, see N for Bankruptcy (Form 2010)). Also, go to the top of   | otice Required by 11 U.S.C. § 342(b) for Individuals Filing page 1 and check the appropriate box.   |  |
|     | are choosing to file<br>under                                | Chapter 7  |   |  |
|     |  | Chapter 11   |   |  |
|     |  | Chapter 12   |   |  |
|     |  | Chapter 13   |   |  |

| Deb | Johnny E Barnes                                 |                | Case number (if known)   |  |   |  |  |  |
|-----|---|----------------|--|--|---|--|--|--|
| 8.  | How you will pay the fee                        | co<br>pa       | I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. |  |   |  |  |  |
|     |   |                | I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).  |  |   |  |  |  |
|     |   | By<br>th<br>fe | y law, a judge may, but is not re<br>an 150% of the official poverty<br>e in installments). If you choos   | (You may request this option only equired to, waive your fee, and may line that applies to your family size this option, you must fill out the A 103B) and file it with your petition. | do so only if your income is less and you are unable to pay the |  |  |  |
| 9.  | Have you filed for                              | <b>☑</b> No    | )  |  |   |  |  |  |
|     | bankruptcy within the last 8 years?             | ☐ Ye           | es.  |  |   |  |  |  |
|     |   | District       | edtx   | When 11/10/2005  |   |  |  |  |
|     |   | District       |  |  | Case number   |  |  |  |
|     |   | District       |  | MM / DD / YYY  When MM / DD / YYY  | Case number   |  |  |  |
| 10. | Are any bankruptcy                              | <b>☑</b> No    | )  |  |   |  |  |  |
|     | cases pending or being filed by a spouse who is | ☐ Ye           | es.  |  |   |  |  |  |
|     | not filing this case with you, or by a business | Debtor         |  | Relatio  | nship to you  |  |  |  |
|     | partner, or by an                               | District       |  |  | Case number,  |  |  |  |
|     | affiliate?                                      |                |  | MM / DD / YYY  | Y if known  |  |  |  |
|     |   | Debtor         |  | Relatio  | nship to you  |  |  |  |
|     |   | District       |  | When   | Case number,  |  |  |  |
|     |   |                |  | MM / DD / YYY  | Y if known  |  |  |  |
| 11. | Do you rent your residence?                     | ✓ No           |  | d an eviction judgment against you   | ?   |  |  |  |
|     |   |                |  | atement About an Eviction Judgmenis bankruptcy petition.   | ent Against You (Form 101A)                                     |  |  |  |

| Deb | tor 1 <b>Joh</b>  | nny E Barnes   |  |  |   | Case number (  | if known)      |             |                      |    |
|-----|---|--|--|--|---|--|----------------|-------------|----------------------|----|
| P   | art 3: R  | eport About Ar   | ıy Bı  | ısine  | sses You Own as                             | a Sole Proprietor  |                |             |                      |    |
| 12. | Are you a so of any full-obusiness?   | ole proprietor<br>or part-time   | <ul><li>✓ No. Go to Part 4.</li><li>✓ Yes. Name and location of business</li></ul> |  |   |  |                |             |                      |    |
|     | A sole proprietorship is a<br>business you operate as an<br>individual, and is not a<br>separate legal entity such as |  |  |  | Name of business, if any  Number Street     |  |                |             |                      |    |
|     | LLC.  | n, partnership, or   |  |  |   |  |                |             |                      |    |
|     | sole propriet   | more than one orship, use a set and attach it  |  |  | City  Check the appropriate                 | box to describe your business:   | State          | ZIP Cod     | de                   |    |
|     | to this petitic   | to this petition.  |  |  | Single Asset Rea  Stockbroker (as of        | ness (as defined in 11 U.S.C. §<br>al Estate (as defined in 11 U.S.C<br>defined in 11 U.S.C. § 101(53A)<br>er (as defined in 11 U.S.C. § 10<br>e | C. § 101(51B)) |             |                      |    |
| 13. | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code and<br>are you a <i>small business</i>                   |  | can<br>mos   | If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). |   |  |                |             |                      |    |
|     | debtor?   |  | No.  | I am not filing under C  | hapter 11.                                  |  |                |             |                      |    |
|     |   | a definition of small<br>siness debtor, see<br>U.S.C. § 101(51D).  |  | No.  | I am filing under Chap the Bankruptcy Code. | ter 11, but I am NOT a small bu  | isiness debtor | according   | g to the definition  | in |
|     | 11 U.S.C. §   |  |  | Yes.   | I am filing under Chap<br>Bankruptcy Code.  | ter 11 and I am a small busines  | s debtor acco  | rding to th | he definition in the | Э  |
| P   | art 4: R  | eport If You Ov  | vn oı  | · Hav  | e Any Hazardous I                           | Property or Any Property   | y That Need    | ds Imm      | ediate Attenti       | on |
| 14. | property the alleged to p imminent an   | Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? |  | No<br>Yes.   | What is the hazard?                         |  |                |             |                      |    |
|     | safety? Or any propert  |  |  |  | If immediate attention                      | is needed, why is it needed?   |                |             |                      |    |
|     | perishable g<br>livestock tha   | e, do you own<br>oods, or<br>It must be fed, or<br>at needs urgent   |  |  | Where is the property                       | ?<br>Number Street   |                |             |                      |    |
|     |   |  |  |  |   | City   |                | State       | ZIP Code             |    |
|     |   |  |  |  |   | Oity   |                | Jiaic       | ZIF COUL             |    |

## Part 5:

### **Explain Your Efforts to Receive a Briefing About Credit Counseling**

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| ji am not | require | ea to rec | eive a briet | ing about |
|-----------|---------|-----------|--------------|-----------|
| credit co | ounseli | ng beca   | use of:      |           |
|           |         |           |              |           |

I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

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If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

## ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do you 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) have? as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. $\overline{\mathbf{Q}}$ 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. State the type of debts you owe that are not consumer or business debts. 17. Are you filing under Chapter 7? I am not filing under Chapter 7. Go to line 18. $\square$ No. Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and Do you estimate that after any exempt property is administrative expenses are paid that funds will be available to distribute to unsecured creditors? excluded and □ No administrative expenses are paid that funds will be ☐ Yes available for distribution to unsecured creditors? 1,000-5,000 18. How many creditors do 1-49 25,001-50,000 you estimate that you 50-99 5,001-10,000 50,001-100,000 owe? 10,001-25,000 More than 100,000 100-199 200-999 19. How much do you \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion $\mathbf{\Lambda}$ estimate your assets to \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion be worth? \$100,001-\$500,000 П \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million П More than \$50 billion 20. How much do you \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion estimate your liabilities to \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion

П

П

П

\$10,000,000,001-\$50 billion

More than \$50 billion

\$50,000,001-\$100 million

\$100,000,001-\$500 million

 $\overline{\mathbf{A}}$ 

\$100,001-\$500,000

\$500,001-\$1 million

be?

Sign Below

#### For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| X /s/ Johnny E Barnes         | X                     |
|-------------------------------|-----------------------|
| Johnny E Barnes, Debtor 1     | Signature of Debtor 2 |
| Executed on <b>06/14/2019</b> | Executed on           |
| MM / DD / YYYY                | MM / DD / YYYY        |

Debtor 1 **Johnny E Barnes** Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ W. David Stephens            |                        | Date  |                     |
|----------------------------------|------------------------|-------|---------------------|
| Signature of Attorney for Debtor |                        |       | MM / DD / YYYY      |
| W. David Stephens                |                        |       |                     |
| Printed name                     |                        |       |                     |
| W. David Stephens                |                        |       |                     |
| Firm Name                        |                        |       |                     |
| P. O. Box 444                    |                        |       |                     |
| Number Street                    |                        |       |                     |
| 103 E Denman                     |                        |       |                     |
| _                                |                        |       |                     |
| Lufkin                           | TX                     |       | 75901               |
| City                             | State                  |       | ZIP Code            |
| Contact phone (936) 639-5898     | Email address <u>v</u> | vdavi | dstephens@gmail.com |
| 19162100                         | <u>TX</u>              |       | _                   |
| Bar number                       | State                  |       |                     |

| Fill in this info  | rmation to iden  | tify your                                      | case and this  | filing:  |   |  |
|--|--|--|--|--|---|--|
| Debtor 1   | Johnny   | E  | Barne  | es   |   |  |
| 1  | First Name   | Middle Nam                                     | e Last Na  | me   |   |  |
| Debtor 2<br>(Spouse, if filing)                                      | First Name   | Middle Nam                                     | e Last Na  | me   |   |  |
| United States Bank   | kruptcy Court for the  | EASTER   | N DISTRICT OF  | TEXAS  |   |  |
|  | araptoy Court for the  | . <u></u>                                      |  | 12/0/10  |   |  |
| Case number (if known)   |  |  |  |  | <b>—</b>  | t if this is an<br>ded filing          |
| Official Form  | 106A/B   |  |  |  |   |  |
| Schedule A/E   | B: Property  |  |  |  |   | 12/15                                  |
| the asset in the cat<br>filing together, both<br>sheet to this form. | egory where you th<br>n are equally respo<br>On the top of any a | nink it fits b<br>nsible for s<br>additional p | est. Be as compl<br>upplying correct<br>ages, write your | lete and accurate as information. If more name and case numl | set fits in more than one ca<br>possible. If two married p<br>space is needed, attach a<br>ber (if known). Answer even<br>state You Own or Have | eople are<br>separate<br>ery question. |
|  |  | •  |  |  |   |  |
| ✓ No. Go to  | , ,  | equitable in                                   | terest in any res  | idence, building, land                                       | d, or similar property?   |  |
|  | •  | -  | -  | ries from Part 1, incl<br>nber here                          | _   | \$0.00                                 |
| Part 2: Des  | cribe Your Vehi  | cles   |  |  |   |  |
|  | _  | -  | -  |  | e registered or not? Include cutory Contracts and Unexp   | -                                      |
| 3. Cars, vans, tru   | icks, tractors, spor   | t utility vehi                                 | icles, motorcycle  | s  |   |  |
| □ No<br><b>√</b> Yes   |  |  |  |  |   |  |
| 3.1.<br>Make:  | Chrysler   | Che  | o has an interest<br>eck one.<br>Debtor 1 only           | in the property?   | Do not deduct secured cla<br>amount of any secured cla<br>Creditors Who Have Clain  |  |
| Model:<br>Year:  | 300<br>2010  | · ·  | Debtor 2 only  |  | Current value of the  | Current value of the                   |
| Approximate mileage  | -  |  | Debtor 1 and Deb   | •  | entire property?  | portion you own?                       |
| Other information:   | e. <u>130,000</u>  | _ 🗆  | At least one of the                                      | e debtors and another  | \$2,920.00  | \$2,920.00                             |
| 2010 Chrysler 30   | 0  |  | Check if this is o                                       | community property   |   |  |
| 3.2.<br>Make:  | Infinity   |  | o has an interest  | in the property?   | Do not deduct secured cla<br>amount of any secured cla  | ims or exemptions. Put the             |
| Model:   | QX80   | <b>☑</b>                                       | Debtor 1 only  |  | Creditors Who Have Clain  |  |
| Year:  | 2014   | — <u> </u>                                     | Debtor 2 only  | 1 O I  | Current value of the  | Current value of the                   |
| Approximate mileage  |  |  | Debtor 1 and Deb<br>At least one of the                  | otor 2 only<br>e debtors and another                         | entire property?<br>\$24,187.50   | portion you own?<br>\$24,187.50        |
| Other information:   |  | - ⊔  | roads one or the   | c abbitoro and another                                       | Ψ24,107.30  | Ψ24,107.30                             |
| 2014 Infinity QX8 miles)   | 0 (approx. 92,000  |  | Check if this is of (see instructions)                   | community property   |   |  |

| Deb | tor 1             | Johnny E Barnes  | Case number (if known)  |
|-----|-------------------|--|---|
| 4.  |                   | raft, aircraft, motor homes, ATVs and other recreational vehicles, other es: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobile                                 |   |
| 5.  |                   | dollar value of the portion you own for all of your entries from Part 2, if for pages you have attached for Part 2. Write that number here   | - C27 107 E0  |
| P   | art 3:            | Describe Your Personal and Household Items   |   |
| Do  | you own           | or have any legal or equitable interest in any of the following items?   | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 6.  |                   | old goods and furnishings<br>es: Major appliances, furniture, linens, china, kitchenware   |   |
|     | □ No              | os. Major appliances, furniture, lineris, crima, kiterieriware   |   |
|     | ✓ Yes             | . Describe See continuation page(s).   | \$10,600.00   |
| 7.  | Electro<br>Exampl | <ul> <li>nics</li> <li>es: Televisions and radios; audio, video, stereo, and digital equipment; commusic collections; electronic devices including cell phones, cameras, me</li> </ul> |   |
|     | ✓ No<br>☐ Yes     | . Describe   |   |
| 8.  |                   | bles of value es: Antiques and figurines; paintings, prints, or other artwork; books, picture stamp, coin, or baseball card collections; other collections, memorabilia                | •   |
|     | ✓ No<br>☐ Yes     | . Describe   |   |
| 9.  |                   | ent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipment; bicycles, por canoes and kayaks; carpentry tools; musical instruments                        | ool tables, golf clubs, skis;   |
|     | ✓ No<br>☐ Yes     | . Describe   |   |
| 10. |                   | es: Pistols, rifles, shotguns, ammunition, and related equipment   |   |
|     | ✓ No<br>☐ Yes     | . Describe   |   |
| 11. |                   | s<br>es: Everyday clothes, furs, leather coats, designer wear, shoes, accessories  | s   |
|     | ☐ No ✓ Yes        | . Describe clothing, shoes, coats  | \$300.00  |
| 12. | Jewelry<br>Exampl | es: Everyday jewelry, costume jewelry, engagement rings, wedding rings, he gold, silver  | eirloom jewelry, watches, gems,   |
|     | ☐ No ✓ Yes        | . Describe ring \$100, ring \$100, ring \$100; necklace \$50; misc   | costume jewelry \$200\$550.00   |
| 13. |                   | m animals<br>es: Dogs, cats, birds, horses   |   |
|     | ✓ No<br>☐ Yes     | . Describe   |   |

| Deb | tor 1            | Johnny E Barnes   |   | Case number (if known)       |   |
|-----|------------------|---|---|------------------------------|---|
| 14. | did not  No  Yes | •   | nold items you did not already list, including an   | ny health aids you           |   |
| 15. |                  |   | our entries from Part 3, including any entries fo   |                              | \$11,450.00   |
| P   | art 4:           | Describe Your Fin   | nancial Assets  |                              |   |
| Do  | ou own           | or have any legal or equ  | uitable interest in any of the following?   |                              | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. | Cash<br>Example  | es: Money you have in yo petition   | our wallet, in your home, in a safe deposit box, and  | d on hand when you file your |   |
|     | □ No ✓ Yes       | i   |   | Cash:                        | \$130.00  |
| 17. | -                | • •   | r other financial accounts; certificates of deposit; snd other similar institutions. If you have multiple a   |                              |   |
|     | □ No<br>☑ Yes    | ·   | Institution name:   |                              |   |
|     | 17.              | 1. Checking account:  | Checking account at Texas Bank and Doches CU \$2  | l Trust \$10                 | \$12.00   |
| 18. |                  | mutual funds, or publicles: Bond funds, investme                              | ly traded stocks ent accounts with brokerage firms, money market  | accounts                     |   |
|     | ✓ No             | Instit  | -   |                              |   |
| 19. | -                | blicly traded stock and i   | interests in incorporated and unincorporated bhip, and joint venture  | ousinesses, including        |   |
|     | info             | . Give specific rmation about n Nam   | ne of entity:   | % of ownership:              |   |
| 20. | Negotia          | ble instruments include p   | nds and other negotiable and non-negotiable in<br>ersonal checks, cashiers' checks, promissory note<br>hose you cannot transfer to someone by signing o | es, and money orders.        |   |
|     | info             | s. Give specific<br>rmation about<br>m Issue                                  | er name:  |                              |   |
| 21. |                  | nent or pension account<br>es: Interests in IRA, ERIS<br>profit-sharing plans | s<br>SA, Keogh, 401(k), 403(b), thrift savings accounts   | , or other pension or        |   |
|     | Yes              | . List each<br>ount separately. Type c  | of account: Institution name:   |                              |   |

| Deb | tor 1              | Johnny E Barnes  | Case number (if known)  |   |
|-----|--------------------|--|---|---|
| 22. | Your sh<br>Example |  | nat you may continue service or use from a company ublic utilities (electric, gas, water), telecommunications |   |
|     | <b>☑</b> No        |  |   |   |
|     | _                  |  | on name or individual:  |   |
| 23. |                    | <b>es</b> (A contract for a specific periodic payment of                                       | of money to you, either for life or for a number of years)  |   |
|     | ✓ No<br>☐ Yes      | Issuer name and description  | on:   |   |
| 24. | Interes            |  | alified ABLE program, or under a qualified state tuition pro  | gram.   |
|     | ✓ No<br>☐ Yes      | s Institution name and descr   | iption. Separately file the records of any interests. 11 U.S.C.   | § 521(c)  |
| 25. |                    | equitable or future interests in property (oth sexercisable for your benefit                   | er than anything listed in line 1), and rights or   |   |
|     | _                  | s. Give specific rmation about them  |   |   |
| 26. |                    | s, copyrights, trademarks, trade secrets, and les: Internet domain names, websites, proceeds   |   |   |
|     |                    | s. Give specific ormation about them   |   |   |
| 27. |                    | es, franchises, and other general intangibles les: Building permits, exclusive licenses, coope | rative association holdings, liquor licenses, professional licens   | es  |
|     |                    | s. Give specific rmation about them  |   |   |
| Mon | ey or pı           | roperty owed to you?   |   | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax ref            | unds owed to you   |   |   |
|     | <b>№</b> No        |  |   |   |
|     | _                  | s. Give specific information   | Federal:  |   |
|     |                    | out them, including whether  | State:  |   |
|     |                    | ı already filed the returns<br>I the tax years   | Local:  |   |
|     |                    |  | Local.  |   |
| 29. | Exampl             | support<br>les: Past due or lump sum alimony, spousal sup                                      | oport, child support, maintenance, divorce settlement, property   | settlement  |
|     | ✓ No<br>☐ Yes      | s. Give specific information   | Alimony:  |   |
|     | _                  | ·  | Maintenance:  |   |
|     |                    |  | Support:  |   |
|     |                    |  | Divorce settlement:   |   |
|     |                    |  |   |   |
|     |                    |  | Property settlement:  |   |

| Deb | tor 1         | Johnny E Barnes   |  | Case number (if known)              |  |
|-----|---------------|---|--|-------------------------------------|--|
| 30. |               |   | ility insurance payments, disability benefits, sic   | k pay, vacation pay, workers'       |  |
|     | ✓ No<br>☐ Yes | Give specific information   | I Security benefits; unpaid loans you made to s  | omeone else                         |  |
| 31. |               | ts in insurance policies<br>es: Health, disability, or I                      | ife insurance; health savings account (HSA); c   | redit, homeowner's, or renter's ins | surance  |
|     | con           | s. Name the insurance inpany of each policy                                   |  |                                     |  |
|     | and           | l list its value  | Company name:  | Beneficiary:                        | Surrender or refund value:   |
|     |               |   | term life insurance; no present value  | children                            | \$0.00   |
| 32. | If you are    |   | due you from someone who has died<br>ng trust, expect proceeds from a life insurance<br>use someone has died | policy, or are currently            |  |
|     | ✓ No<br>☐ Yes | s. Give specific information  | on   |                                     |  |
| 33. |               | -   | hether or not you have filed a lawsuit or madent disputes, insurance claims, or rights to sue                | de a demand for payment             |  |
|     |               | s. Describe each claim  |  |                                     |  |
| 34. | rights t      | ontingent and unliquida<br>o set off claims                                   | ated claims of every nature, including count   | erclaims of the debtor and          |  |
|     | ك             | s. Describe each claim  |  |                                     |  |
| 35. | Any fin       | ancial assets you did no  | ot already list  |                                     |  |
|     | ✓ No<br>☐ Yes | s. Give specific information  | on   |                                     |  |
| 36. |               | -   | our entries from Part 4, including any entries<br>number here  |                                     | \$142.00   |
| Pa  | art 5:        | Describe Any Busir  | ness-Related Property You Own or I   | lave an Interest In. List a         | ny real estate in Part 1.  |
| 37. | Do you        | own or have any legal of  | or equitable interest in any business-related  | property?                           |  |
|     | _             | Go to Part 6.<br>Go to line 38.   |  |                                     |  |
|     | ш             |   |  |                                     |  |
|     |               |   |  |                                     | Current value of the portion you own?  Do not deduct secured claims or exemptions. |
| 38. | Accour        | nts receivable or commi   | ssions you already earned  |                                     | Statille of exemptions.  |
|     | ✓ No<br>☐ Yes | s. Describe   |  |                                     |  |
| 39. | Exampl        | equipment, furnishings,<br>es: Business-related con<br>desks, chairs, electro | nputers, software, modems, printers, copiers, fa   | ax machines, rugs, telephones,      |  |
|     | ✓ No<br>☐ Yes | s. Describe   |  |                                     |  |

| Deb | tor 1         | Johnny E Barnes  | Case number (if known)      |  |
|-----|---------------|--|-----------------------------|--|
| 40. | Machin        | ery, fixtures, equipment, supplies you use in business, and tools of yo  | our trade                   |  |
|     | ✓ No<br>☐ Yes | . Describe   |                             |  |
| 41. | Invento       | ry   |                             |  |
|     | ✓ No<br>☐ Yes | . Describe   |                             |  |
| 42. | Interest      | s in partnerships or joint ventures  |                             |  |
|     | ✓ No          | . Describe Name of entity:   | % of ownership:             |  |
| 43. | Custon        | er lists, mailing lists, or other compilations   |                             |  |
|     | ✓ No<br>☐ Yes | . Do your lists include personally identifiable information (as defined in No Yes. Describe                          | in 11 U.S.C. § 101(41A))?   |  |
| 44. | Any bu        | siness-related property you did not already list   |                             |  |
|     | ✓ No<br>☐ Yes | . Give specific information.   |                             |  |
| 45. |               | dollar value of all of your entries from Part 5, including any entries for d for Part 5. Write that number here      |                             | \$0.00   |
|     |               | Describe Any Farm- and Commercial Fishing-Related Pro If you own or have an interest in farmland, list it in Part 1. |                             | est In.  |
| 46. | •             | own or have any legal or equitable interest in any farm- or commercial   | i fishing-related property? |  |
|     |               | Go to Part 7 Go to line 47.  |                             |  |
|     | _             |  | <b>portio</b><br>Do not     | nt value of the n you own? t deduct secured or exemptions. |
| 47. | Farm a        | nimals<br>es: Livestock, poultry, farm-raised fish   |                             |  |
|     | ✓ No  Yes     |  |                             |  |
| 48. | Crops         | either growing or harvested  |                             |  |
|     |               | . Give specific rmation  |                             |  |
| 49. | Farm a        | nd fishing equipment, implements, machinery, fixtures, and tools of tra  | ade                         |  |
|     | ✓ No<br>☐ Yes |  |                             |  |
| 50. | Farm a        | nd fishing supplies, chemicals, and feed   |                             |  |
|     | ✓ No<br>☐ Yes |  |                             |  |

| Deb | otor 1 Johnny E Barnes   | Case no                  | umber (if known)             |               |
|-----|--|--------------------------|------------------------------|---------------|
| 51. |  |                          |                              |               |
|     | ✓ No ☐ Yes. Give specific information  |                          |                              |               |
| 52. | Add the dollar value of all of your entries from Part 6, incluattached for Part 6. Write that number here      | \$0.00                   |                              |               |
| Pa  | art 7: Describe All Property You Own or Have a   | n Interest in That You I | Did Not List Above           | 9             |
| 53. | Do you have other property of any kind you did not alread<br>Examples: Season tickets, country club membership | y list?                  |                              |               |
|     | ☐ No ☐ Yes. Give specific information.   |                          |                              |               |
|     | VA Benefits  |                          |                              | \$3,057.13    |
|     | social security benefits   |                          |                              | \$865.00      |
| 54. | Add the dollar value of all of your entries from Part 7. Writ  | te that number here      | <b></b>                      | \$3,922.13    |
| Pa  | art 8: List the Totals of Each Part of this Form   |                          |                              |               |
| 55. | Part 1: Total real estate, line 2  |                          | <b>→</b>                     | \$0.00        |
| 56. | Part 2: Total vehicles, line 5   | \$27,107.50              |                              |               |
| 57. | Part 3: Total personal and household items, line 15  | \$11,450.00              |                              |               |
| 58. | Part 4: Total financial assets, line 36  | \$142.00                 |                              |               |
| 59. | Part 5: Total business-related property, line 45   | \$0.00                   |                              |               |
| 60. | Part 6: Total farm- and fishing-related property, line 52  | \$0.00                   |                              |               |
| 61. | Part 7: Total other property not listed, line 54   | +\$3,922.13              |                              |               |
| 62. | Total personal property. Add lines 56 through 61   | \$42,621.63              | Copy personal property total | + \$42,621.63 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line  | 62                       |                              | \$42,621.63   |

| De | ו וסוט  | Johnny E Barnes                            | Case number (if known) |            |
|----|---------|--|------------------------|------------|
|    |         |  |                        |            |
| 6. | Househ  | nold goods and furnishings (details):      |                        |            |
|    | dryer,  | 3 tvs, recliner, heater, 2 acond           |                        | \$3,600.00 |
|    | bdrm s  | suit, lvingroomsuit,tv, washer, tv         |                        | \$6,000.00 |
|    | furnitu | re & furnishings; no item worth over \$625 |                        | \$1,000.00 |

| Fill in this in  | formation to iden  | tify your  | case:   |                               |   |  |         |
|--|--|--|---|-------------------------------|---|--|---------|
| Debtor 1   | Johnny<br>First Name   | E<br>Middle Name   | Barnes e Last Name  |                               |   |  |         |
| Debtor 2   |  |  |   |                               |   |  |         |
| (Spouse, if filing)  | ) First Name<br>Inkruptcy Court for the  | Middle Name  |   | YAS                           |   |  |         |
| Case number  | inkrupicy Court for the  | LASILKI  | N DISTRICT OF TE  | AAC                           | <u>'</u>  | Check if this is an amended filing   |         |
| (if known)   |  |  |   |                               |   | · ·  |         |
| Official Form  | 106C   |  |   |                               |   |  |         |
| Schedule C   | : The Property   | You Cl   | aim as Exemp  | t                             |   |  | 04/19   |
| Using the property space is needed, f write your name ar                           | you listed on Schedu.<br>iill out and attach to thind case number (if known)                     | le A/B: Prop<br>is page as m<br>own).                        | perty (Official Form 106 nany copies of Part 2  | 6A/B)<br>?: Ad                | ) as your source, I<br>ditional Page as   | ally responsible for supplying correct informist the property that you claim as exempt.  necessary. On the top of any additional particles are considered to the control of | If more |
| is to state a spec<br>exempted up to the<br>receive certain be<br>exemption of 100 | ific dollar amount as<br>he amount of any app<br>enefits, and tax-exem<br>% of fair market value | exempt. Al<br>blicable stat<br>pt retirement<br>e under a la | Iternatively, you may<br>tutory limit. Some ex<br>nt fundsmay be unli<br>aw that limits the exe | claii<br>emp<br>imite<br>mpti | m the full fair ma<br>tionssuch as the<br>ed in dollar amou<br>on to a particular | tion you claim. One way of doing so rket value of the property being nose for health aids, rights to int. However, if you claim an r dollar amount and the value of the licable statutory amount.  |         |
| Part 1: Ide  | entify the Propert   | y You Cla  | aim as Exempt   |                               |   |  |         |
| 1. Which set of  | exemptions are you   | claiming?  | Check one only, e   | even                          | if your spouse is   | filing with you.   |         |
| —  | claiming state and fed   |  |   | 11 U                          | .S.C. § 522(b)(3)   |  |         |
| _  | claiming federal exem  |  |   |                               |   |  |         |
|  | perty you list on Sche   |  | •   | •                             |   |  |         |
| •  | of the property and li<br>t lists this property  | ine on   | Current value of<br>the portion you<br>own  |                               | ount of the<br>emption you clain  | Specific laws that allow exemption   | on      |
|  |  |  | Copy the value from Schedule A/B  |                               | eck only one box t<br>h exemption   | for  |         |
| Brief description:   |  |  | \$1,000.00  | M                             | \$1,000.00  | 11 U.S.C. § 522(d)(3)  |         |
| furniture & furn<br>\$625  | ishings; no item w   | orth over  |   |                               | 100% of fair man  | rket   |         |
| Line from Schedul  | de A/B: <b>6</b>   |  |   |                               | applicable statut   |  |         |
| Brief description:   |  |  | \$300.00  |                               | \$300.00  | 11 U.S.C. § 522(d)(3)  |         |
| clothing, shoes Line from Schedul  |  |  |   |                               | 100% of fair man<br>value, up to any<br>applicable statut<br>limit                |  |         |
|  | <b>ning a homestead ex</b><br>djustment on 4/01/22 a   | -  |   |                               | led on or after the   | date of adjustment.)   |         |

| Debtor 1 | Johnny E Barnes | Case number (if known) |  |
|----------|-----------------|------------------------|--|
|          |                 |                        |  |

| Part 2: Additional Page  |                                      |  |                                    |
|--|--------------------------------------|--|------------------------------------|
| Brief description of the property and line on Schedule A/B that lists this property                            | Current value of the portion you own | Amount of the exemption you claim  | Specific laws that allow exemption |
|  | Copy the value from<br>Schedule A/B  | Check only one box for each exemption                                      |                                    |
| Brief description: ring \$100, ring \$100; necklace \$50; misc costume jewelry \$200 Line from Schedule A/B:12 | <u>\$550.00</u>                      | \$550.00 100% of fair market value, up to any applicable statutory limit   | 11 U.S.C. § 522(d)(4)              |
| Brief description: \$130 Line from Schedule A/B:16   | <u>\$130.00</u>                      | \$130.00 100% of fair market value, up to any applicable statutory limit   | 11 U.S.C. § 522(d)(5)              |
| Brief description: Checking account at Texas Bank and Trust \$10 Doches CU \$2 Line from Schedule A/B:         | \$12.00                              | \$12.00 100% of fair market value, up to any applicable statutory limit    | 11 U.S.C. § 522(d)(5)              |
| Brief description:  VA Benefits  Line from Schedule A/B:53   | \$3,057.13                           | \$3,057.13 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(10)(B)          |
| Brief description: social security benefits Line from Schedule A/B:53  | \$865.00                             | \$865.00  100% of fair market value, up to any applicable statutory limit  | 11 U.S.C. § 522(d)(10)(A)          |

# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF TEXAS LUFKIN DIVISION

IN RE: **Johnny E Barnes** CASE NO

CHAPTER 13

Scheme Selected: Federal

### SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

### **Exemption Totals by Category:**

(Values and liens of surrendered property are NOT included in this section)

| No. | Category  | Gross<br>Property Value | Total<br>Encumbrances | Total<br>Equity | Total Amount<br>Exempt | Total Amount<br>Non-Exempt |
|-----|---|-------------------------|-----------------------|-----------------|------------------------|----------------------------|
| 1.  | Real property                                       | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 3.  | Motor vehicles (cars, etc.)                         | \$27,107.50             | \$33,697.82           | \$0.00          | \$0.00                 | \$0.00                     |
| 4.  | Water/Aircraft, Motor Homes, Rec. veh. and access.  | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 6.  | Household goods and furnishings                     | \$10,600.00             | \$16,368.00           | \$1,000.00      | \$1,000.00             | \$0.00                     |
| 7.  | Electronics   | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 8.  | Collectibles of value                               | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 9.  | Equipment for sports and hobbies                    | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 10. | Firearms  | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 11. | Clothes   | \$300.00                | \$0.00                | \$300.00        | \$300.00               | \$0.00                     |
| 12. | Jewelry   | \$550.00                | \$0.00                | \$550.00        | \$550.00               | \$0.00                     |
| 13. | Non-farm animals                                    | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 14. | Unlisted pers. and household itemsincl. health aids | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 16. | Cash  | \$130.00                | \$0.00                | \$130.00        | \$130.00               | \$0.00                     |
| 17. | Deposits of money                                   | \$12.00                 | \$0.00                | \$12.00         | \$12.00                | \$0.00                     |
| 18. | Bonds, mutual funds or publicly traded stocks       | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 19. | Non-pub. traded stock and int. in businesses        | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 20. | Govt. and corp. bonds and other instruments         | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 21. | Retirement or pension accounts                      | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 22. | Security deposits and prepayments                   | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 23. | Annuities   | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 24. | Interests in an education IRA                       | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 25. | Trusts, equit. or future int. (not in line 1)       | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 26. | Patents, copyrights, and other intellectual prop.   | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 27. | Licenses, franchises, other general intangibles     | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 28. | Tax refunds owed to you                             | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |

# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF TEXAS LUFKIN DIVISION

IN RE: **Johnny E Barnes** CASE NO

CHAPTER 13

Scheme Selected: Federal

### SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet # 1

### **Exemption Totals by Category:**

(Values and liens of surrendered property are NOT included in this section)

| No. | Category  | Gross<br>Property Value | Total<br>Encumbrances | Total<br>Equity | Total Amount<br>Exempt | Total Amount<br>Non-Exempt |
|-----|---|-------------------------|-----------------------|-----------------|------------------------|----------------------------|
| 29. | Family support                                      | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 30. | Other amounts someone owes you                      | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 31. | Interests in insurance policies                     | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 32. | Any int. in prop. due you from someone who has died | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 33. | Claims vs. third parties, even if no demand         | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 34. | Other contin. and unliq. claims of every nature     | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 35. | Any financial assets you did not already list       | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 38. | Accounts rec. or commissions you already earned     | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 39. | Office equipment, furnishings, and supplies         | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 40. | Mach., fixt., equip., bus. suppl., tools of trade   | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 41. | Inventory   | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 42. | Interests in partnerships or joint ventures         | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 43. | Customer and mailing lists, or other compilations   | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 44. | Any business-related property not already listed    | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 47. | Farm animals  | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 48. | Cropseither growing or harvested                    | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 49. | Farm/fishing equip., impl., mach., fixt., tools     | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 50. | Farm and fishing supplies, chemicals, and feed      | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 51. | Farm/commercial fishing-related prop. not listed    | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 53. | Any other property of any kind not already listed   | \$3,922.13              | \$0.00                | \$3,922.13      | \$3,922.13             | \$0.00                     |
|     | TOTALS:   | \$42,621.63             | \$50,065.82           | \$5,914.13      | \$5,914.13             | \$0.00                     |

# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF TEXAS LUFKIN DIVISION

IN RE: **Johnny E Barnes** CASE NO

CHAPTER 13

### SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #2

### **Surrendered Property:**

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder.

| Property Description  |              | Market Value | Lien      | Equity          |
|---|--------------|--------------|-----------|-----------------|
| Real Property (None)  |              |              |           |                 |
| Personal Property (None)  |              |              |           |                 |
| TOTALS:   |              | \$0.00       | \$0.00    | \$0.00          |
| Non-Exempt Property by Item: The following property, or a portion thereof, is non-exempt. |              |              |           |                 |
| Property Description  | Market Value | Lien         | Equity No | n-Exempt Amount |
| Real Property (None) Personal Property (None)   |              |              |           |                 |

TOTALS: \$0.00 \$0.00 \$0.00

| Summary  |             |
|--|-------------|
| A. Gross Property Value (not including surrendered property)                   | \$42,621.63 |
| B. Gross Property Value of Surrendered Property                                | \$0.00      |
| C. Total Gross Property Value (A+B)  | \$42,621.63 |
| D. Gross Amount of Encumbrances (not including surrendered property)           | \$50,065.82 |
| E. Gross Amount of Encumbrances on Surrendered Property                        | \$0.00      |
| F. Total Gross Encumbrances (D+E)  | \$50,065.82 |
| G. Total Equity (not including surrendered property) / (A-D)                   | \$5,914.13  |
| H. Total Equity in surrendered items (B-E)                                     | \$0.00      |
| I. Total Equity (C-F)  | \$5,914.13  |
| J. Total Exemptions Claimed (Wild Card Used: \$142.00, Available: \$13,758.00) | \$5,914.13  |
| K. Total Non-Exempt Property Remaining (G-J)                                   | \$0.00      |

| Fill in this inf  | ormation to   | identify your case   | :  |  |  |  |
|---|---|--|--|--|--|--|
| Debtor 1  | Johnny<br>First Name  | E<br>Middle Name   | Barnes Last Name   |  |  |  |
|   | riistivaille  | wilddie Name   | Last Name  |  |  |  |
| Debtor 2 (Spouse, if filing)  | First Name  | Middle Name  | Last Name  |  |  |  |
| United States Bar   | nkruptov Court fo   | or the: <b>EASTERN DIS</b>   | STRICT OF TEXAS  |  |  |  |
| Case number   | intupley Court is   | or the. <u>PAOTERITOR</u>  | THIS OF TEXAS  |  |  |  |
| (if known)  |   |  |  |  | Check i  | if this is an<br>ed filing                   |
| Official Form   | 106D  |  |  |  |  | J. J     |
|   |   | Who Have Cla   | ims Secured  | hy Property  |  | 12/15  |
|   |   | possible. If two marrie  |  |  |  |  |
| On the top of any  1. Do any credit  □ No. Chee □ Yes. Fill  Part 1: Lis  2. List all secure claim, list the creditor has a much as poss creditor's nam | cors have claims ck this box and s in all of the inform t All Secured ed claims. If a coreditor separate particular claim, ible, list the clair | creditor has more than ely for each claim. If me list the other creditors as in alphabetical order | perty? court with your other some secured one than one in Part 2. As | Column A Amount of clair Do not deduct the value of collater | Column B  Value of collate that supports a claim | column C teral Unsecured this portion If any |
| 2.1   |   | secures the  |  | \$6,000.   | 96,00  | 00.00  |
| Aarons Sales & Creditor's name 717 N University Number Street   |   | washer, tv   | lvingroomsuit,tv,<br>te you file, the claim                          | is: Check all that ap  | ply.   |  |
| Nacogdoches City Who owes the dek ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and D ☐ At least one of ☐ Check if this of to a community                  | Debtor 2 only<br>the debtors and  | Continge Unliquida Disputed Nature of lie An agree Statutory Judgmer Vother (in                    | nt<br>ated<br>n. Check all that app                                  | oly.<br>h as mortgage or sec<br>ı, mechanic's lien)          |  |  |
| Date debt was inc   | urred <u>12/201</u>   | 8 Last 4 digits  | of account number  |  | _  |  |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$6,000.00

Add the dollar value of your entries in Column A on this page. Write that number here:

9/2017

\$40,508.82

Date debt was incurred

Last 4 digits of account number

| Case number (if known)   |  |   |   |  |  |
|--|--|---|---|--|--|
|  | Column A  Amount of claim  Do not deduct the value of collateral   | Column B Value of collateral that supports this claim   | Column C Unsecured portion If any   |  |  |
| Describe the property that secures the claim:  | \$3,557.00   | \$2,920.00  | \$637.00  |  |  |
| 2010 Chrysler 300  |  |   |   |  |  |
| Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, m Judgment lien from a lawsuit | s mortgage or secured  | car loan)   |   |  |  |
|  | secures the claim:  2010 Chrysler 300  As of the date you file, the claim is:  Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, m Judgment lien from a lawsuit  Other (including a right to offset) | Column A Amount of claim Do not deduct the value of collateral  Describe the property that secures the claim:  2010 Chrysler 300  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit  Other (including a right to offset) | Column A Amount of claim Do not deduct the value of collateral that supports this claim  Describe the property that secures the claim:  2010 Chrysler 300  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) |  |  |

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

\$3,557.00

0 3 0 1

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$50,065.82

Date debt was incurred 07/2011

| Fill in this inf  | ormation to i   | dentify your c   | ase:  |   |   |                             |
|---|---|--|---|---|---|-----------------------------|
| Debtor 1  | Johnny  | E  | Barnes  |   |   |                             |
|   | First Name  | Middle Name  | Last Name   |   |   |                             |
| Debtor 2  |   |  |   |   |   |                             |
| (Spouse, if filing)   | First Name  | Middle Name  | Last Name   |   |   |                             |
| United States Ba  | nkruptcy Court fo   | or the: <b>EASTERN</b>   | DISTRICT OF TEXAS   |   |   |                             |
| Case number   |   |  |   |   | Check if this is a                            | an                          |
| (if known)  |   |  |   | _   | amended filing                                | 311                         |
| Official Form   | 106E/F  |  |   | _   |   |                             |
| Schedule E/   | /F: Credito   | s Who Hav  | e Unsecured Claims  |   |   | 12/15                       |
| Do not include an If more space is not to this page. On the         | y creditors with<br>needed, copy the<br>the top of any ac                             | partially secured<br>Part you need, f<br>Iditional pages, w                | and on Schedule G: Executory Co<br>I claims that are listed in Schedule<br>ill it out, number the entries in the<br>rrite your name and case number<br>secured Claims                                 | D: Creditors Who Hoboxes on the left. A                                     | old Claims Secur                              | ed by Property.             |
| 1. Do any credi   | tors have priorit   | y unsecured clai   | ms against you?   |   |   |                             |
| □ No. Go  |   |  | 5   |   |   |                             |
| ✓ Yes.  |   |  |   |   |   |                             |
| claim. For ea<br>show both pric<br>more space is<br>claim, list the | ch claim listed, ic<br>ority and nonprior<br>s needed for prior<br>other creditors in | dentify what type o<br>rity amounts. As n<br>ity unsecured clai<br>Part 3. | creditor has more than one priority of claim it is. If a claim has both prioring huch as possible, list the claims in a ms, fill out the Continuation Page of e instructions for this form in the ins | rity and nonpriority am<br>Iphabetical order acco<br>Part 1. If more than c | ounts, list that clain ording to the creditor | m here and<br>or's name. If |
|   |   |  |   | Total Claim   | amount  | amount                      |
| 2.1   |   |  |   | \$3,403.00  | \$3,403.00                                    | \$0.00                      |
| W. David Stephe   |   |  | Loct 4 digits of account number   |   |   |                             |
| Priority Creditor's Nam<br>P. O. Box 444                            | ne  |  | Last 4 digits of account number   |   |   |                             |
| Number Street   |   |  | When was the debt incurred?   | 06/13/2019  | _   |                             |
| 103 E Denman A  | Ave   |  | As of the date you file, the claim  | is: Check all that app  | oly.  |                             |
|   |   |  | Contingent  |   |   |                             |
| Lufkin  | TX  | 75901  | ☐ Unliquidated Disputed   |   |   |                             |
| City  | State   | ZIP Code   | <b>—</b> .  |   |   |                             |
| Who incurred the Debtor 1 only                                      | debt? Check   | one.   | Type of PRIORITY unsecured cla  | aim:  |   |                             |
| Debtor 2 only   |   |  | <ul><li>Domestic support obligations</li><li>Taxes and certain other debts</li></ul>  | vou owe the governm   | ent   |                             |
| Debtor 1 and D  |   |  | Claims for death or personal in   |   |   |                             |
| 브 a   | the debtors and   |  | intoxicated   |   |   |                             |
|   | claim is for a co   | minunity debt  | Other. Specify  Attorney fees for this case   | Δ   |   |                             |
| Is the claim subje  | CL TO OHSEL!  |  | Attorney fees for this cas  | <del>C</del>  |   |                             |
| Yes   |   |  |   |   |   |                             |

| Debtor 1 Johnny E Barnes   | Case number (if known)  |
|--|---|
| Part 2: List All of Your NONPRIORITY   | Y Unsecured Claims  |
| Yes  4. List all of your nonpriority unsecured claims if a creditor has more than one nonpriority unsecured type of claim it is. Do not list claims already incli  | Submit this form to the court with your other schedules.  In the alphabetical order of the creditor who holds each claim.  For each claim, list the creditor separately for each claim. For each claim listed, identify what uded in Part 1. If more than one creditor holds a particular claim, list the other creditors in insecured claims, fill out the Continuation Page of Part 2.    Total claim   |
| Allied Interstate LIc Nonpriority Creditor's Name Attn: Bankruptcy Department Number Street PO Box 361477  Columbus OH 43236 City State ZIP Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes | #\$1,047.00  Last 4 digits of account number 3 8 4 2  When was the debt incurred? 02/2019  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collecting for -dish network |

| Jonnny E Barnes   | Case number (if known)   |                                       |
|---|--|---------------------------------------|
| Part 2: Your NONPRIORITY Unsecu   | red Claims Continuation Page   |                                       |
| After listing any entries on this page, number the previous page.                     | m sequentially from the  | Total claim                           |
| 4.3   |  | \$677.00                              |
| Capital One   | _ Last 4 digits of account number _5_ 0_ 0_ 1_                                       |                                       |
| Nonpriority Creditor's Name Attn: Bankruptcy  | When was the debt incurred? 11/2015  |                                       |
| Number Street   | As of the date you file, the claim is: Check all that apply.                         |                                       |
| PO Box 30285  | _ ☐ Contingent ☐ Unliquidated  |                                       |
|   | □ Disputed   |                                       |
| Salt Lake City         UT         84130           City         State         ZIP Code | - Toward MONDRIODITY was a sound of a large  |                                       |
| Who incurred the debt? Check one.   | Type of NONPRIORITY unsecured claim:  Student loans                                  |                                       |
| Debtor 1 only   | Obligations arising out of a separation agreement or divorce                         |                                       |
| Debtor 2 only Debtor 1 and Debtor 2 only  | that you did not report as priority claims   |                                       |
| At least one of the debtors and another   | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify |                                       |
| Check if this claim is for a community debt   | ✓ Other. Specify  Credit Card  |                                       |
| Is the claim subject to offset?   |  |                                       |
| ☑ No  |  |                                       |
| Yes   |  |                                       |
| 4.4   |  | \$107.00                              |
| CenterPoint Energy, Inc   | Last 4 digits of account number 0 5 4 6  | · · · · · · · · · · · · · · · · · · · |
| Nonpriority Creditor's Name Attn: Bankruptcy  | When was the debt incurred? 12/2004  |                                       |
| Number Street   | As of the date you file, the claim is: Check all that apply.                         |                                       |
| PO Box 4981   | _ Contingent   |                                       |
|   | ☐ Unliquidated ☐ Disputed  |                                       |
| Houston TX 77210  |  |                                       |
| City State ZIP Code  Who incurred the debt? Check one.                                | Type of NONPRIORITY unsecured claim:   |                                       |
| Debtor 1 only   | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce       |                                       |
| Debtor 2 only   | that you did not report as priority claims   |                                       |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another                   | Debts to pension or profit-sharing plans, and other similar debts                    |                                       |
| ☐ Check if this claim is for a community debt   | ✓ Other. Specify  Agriculture  |                                       |
| Is the claim subject to offset?   | rigitoutiulo   |                                       |
| <b>☑</b> No   |  |                                       |
| Yes   |  |                                       |
| 4.5   |  | \$536.00                              |
| Comenity Bank/Blair   | Last 4 digits of account number 4 7 1 5  |                                       |
| Nonpriority Creditor's Name   | When was the debt incurred? 09/2017  |                                       |
| Attn: Bankruptcy Number Street  | As of the date you file, the claim is: Check all that apply.                         |                                       |
| PO Box 182125   | _ Contingent   |                                       |
|   | ☐ Unliquidated ☐ Disputed  |                                       |
| Columbus OH 43218   |  |                                       |
| City State ZIP Code  Who incurred the debt? Check one.                                | Type of NONPRIORITY unsecured claim:   |                                       |
| Debtor 1 only   | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce       |                                       |
| Debtor 2 only   | that you did not report as priority claims   |                                       |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another                   | ☐ Debts to pension or profit-sharing plans, and other similar debts                  |                                       |
|   | Other. Specify Charge Account  |                                       |
| Is the claim subject to offset?   | Charge Account   |                                       |
| No  |  |                                       |
| Yes   |  |                                       |

| Jonnny E Barnes   | Case number (if known)  |             |
|---|---|-------------|
| Part 2: Your NONPRIORITY Unsecu   | red Claims Continuation Page  |             |
| After listing any entries on this page, number the previous page.             | em sequentially from the  | Total claim |
| 4.6   |   | \$276.00    |
| Diversified Consultants, Inc.   | Last 4 digits of account number 8 4 2 9   |             |
| Nonpriority Creditor's Name Attn: Bankruptcy                                  | When was the debt incurred? 02/2019   |             |
| Number Street<br>PO Box 679543  | As of the date you file, the claim is: Check all that apply.  |             |
| FO BOX 079343   |   |             |
|   | Disputed  |             |
| Dallas         TX         75267           City         State         ZIP Code | Type of NONDDIODITY unsecured claim:  |             |
| Who incurred the debt? Check one.   | Type of NONPRIORITY unsecured claim:  Student loans   |             |
| Debtor 1 only   | Obligations arising out of a separation agreement or divorce  |             |
| Debtor 2 only Debtor 1 and Debtor 2 only                                      | that you did not report as priority claims  |             |
| At least one of the debtors and another                                       | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify  |             |
| Check if this claim is for a community debt                                   | Collecting for dish netework  |             |
| Is the claim subject to offset?   |   |             |
| ☑ No  |   |             |
| Yes   |   |             |
| 4.7   |   | \$360.00    |
| ERC/Enhanced Recovery Corp  | Last 4 digits of account number 8 2 6 5   | <del></del> |
| Nonpriority Creditor's Name   | When was the debt incurred? 07/2018   |             |
| Attn: Bankruptcy Number Street  | As of the date you file, the claim is: Check all that apply.  |             |
| 8014 Bayberry Road  | Contingent  |             |
|   | ☐ Unliquidated ☐ Disputed   |             |
| Jacksonville FL 32256   |   |             |
| City State ZIP Code Who incurred the debt? Check one.                         | Type of NONPRIORITY unsecured claim:  |             |
| Debtor 1 only   | Student loans  Obligations origing out of a constation agreement or diverse   |             |
| Debtor 2 only   | <ul> <li>Obligations arising out of a separation agreement or divorce<br/>that you did not report as priority claims</li> </ul> |             |
| Debtor 1 and Debtor 2 only  | Debts to pension or profit-sharing plans, and other similar debts   |             |
| At least one of the debtors and another                                       | Other. Specify  |             |
| Check if this claim is for a community debt Is the claim subject to offset?   | Collecting for -ATT U Verse   |             |
| No No   |   |             |
| Yes   |   |             |
| 4.9   |   |             |
| 4.8   | Lord A Balto of account number 100000   | \$595.00    |
| I C System Inc Nonpriority Creditor's Name                                    | Last 4 digits of account number 9 6 8 3   |             |
| Attn: Bankruptcy  | When was the debt incurred? 06/2018   |             |
| Number Street PO Box 64378  | As of the date you file, the claim is: Check all that apply.  Contingent  |             |
|   | Unliquidated  |             |
| St Paul MN 55164  | Disputed  |             |
| City State ZIP Code   | Type of NONPRIORITY unsecured claim:  |             |
| Who incurred the debt? Check one.   | Student loans   |             |
| Debtor 1 only  Debtor 2 only  | Obligations arising out of a separation agreement or divorce  |             |
| Debtor 1 and Debtor 2 only  | that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts                   |             |
| At least one of the debtors and another                                       | Other. Specify  |             |
| ☐ Check if this claim is for a community debt                                 | Collecting for -ATT Direct TV   |             |
| Is the claim subject to offset?   |   |             |
| No<br>Ves   |   |             |
| Yes   |   |             |

| Jonnny E Barnes  | Case number (if known)   |             |
|--|--|-------------|
| Part 2: Your NONPRIORITY Unsecu  | red Claims Continuation Page   |             |
| After listing any entries on this page, number the previous page.                    | m sequentially from the  | Total claim |
| 4.9  |  | \$7,790.00  |
| Lendmark Financial Services  | _ Last 4 digits of account number0109_   |             |
| Nonpriority Creditor's Name<br>1735 North Brown Road                                 | When was the debt incurred? 12/2018  |             |
| Number Street Suite 300  | As of the date you file, the claim is: Check all that apply.                         |             |
| Suite 300  | ☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent                              |             |
| Laurana a sailla OA 00040  | Disputed   |             |
| Lawrenceville         GA         30043           City         State         ZIP Code | Type of NONPRIORITY unsecured claim:   |             |
| Who incurred the debt? Check one.  | Student loans  |             |
| Debtor 1 only  | Obligations arising out of a separation agreement or divorce                         |             |
| Debtor 2 only Debtor 1 and Debtor 2 only   | that you did not report as priority claims   |             |
| At least one of the debtors and another  | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify |             |
| Check if this claim is for a community debt  | Unsecured  |             |
| Is the claim subject to offset?  |  |             |
| No Yes   |  |             |
| Yes  |  |             |
| 4.10   |  | \$1,706.00  |
| National Credit Adjusters, LLC   | Last 4 digits of account number 8 0 8 1  |             |
| Nonpriority Creditor's Name<br>327 West 4th Avenue                                   | When was the debt incurred? 12/02/2015   |             |
| Number Street  | As of the date you file, the claim is: Check all that apply.                         |             |
| PO Box 3023  | _ Contingent   |             |
|  | ☐ Unliquidated ☐ Disputed  |             |
| Hutchinson         KS         67504           City         State         ZIP Code    |  |             |
| City State ZIP Code  Who incurred the debt? Check one.                               | Type of NONPRIORITY unsecured claim:   |             |
| Debtor 1 only  | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce       |             |
| Debtor 2 only Debtor 1 and Debtor 2 only   | that you did not report as priority claims   |             |
| At least one of the debtors and another  | Debts to pension or profit-sharing plans, and other similar debts                    |             |
| Check if this claim is for a community debt  |  |             |
| Is the claim subject to offset?  | concoming for the outlinesses  |             |
| <b>☑</b> No  |  |             |
| Yes  |  |             |
| 4.11   |  | \$8,828.00  |
| OneMain Financial  | Last 4 digits of account number 7 5 1 5  |             |
| Nonpriority Creditor's Name  | When was the debt incurred? 07/2018  |             |
| Attn: Bankruptcy Number Street   | As of the date you file, the claim is: Check all that apply.                         |             |
| 601 NW 2nd St #300   | _ Contingent   |             |
|  | Unliquidated Disputed  |             |
| Evansville IN 47708  |  |             |
| City State ZIP Code  Who incurred the debt? Check one.                               | Type of NONPRIORITY unsecured claim:   |             |
| Debtor 1 only  | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce       |             |
| Debtor 2 only  | that you did not report as priority claims   |             |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another                  | ☐ Debts to pension or profit-sharing plans, and other similar debts                  |             |
| — Object Wilder alabasis for a community data  |  |             |
| Is the claim subject to offset?  | Oliseculeu   |             |
| No   |  |             |
| Yes  |  |             |

| Debtor 1 Johnny E Barnes   | Case number (if known)   |             |
|--|--|-------------|
| Part 2: Your NONPRIORITY Unsecur   | ed Claims Continuation Page  |             |
| After listing any entries on this page, number the previous page.  | n sequentially from the  | Total claim |
| RMP ST Lukes Health  Nonpriority Creditor's Name  Attn: Bankruptcy  Number Street  PO Box 21626  | Last 4 digits of account number 2 9 1 3  When was the debt incurred? 10/2018  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated  | \$794.00    |
| Waco  City  State  ZIP Code  Who incurred the debt?  Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset? | Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Collection Attorney           |             |
| No Yes  4.13  TXU/Texas Energy Nonpriority Creditor's Name Attn: Bankruptcy Number Street PO Box 650393  | Last 4 digits of account number 2 2 0 5 When was the debt incurred? 01/2013  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated   | \$929.00    |
| Dallas  City State ZIP Code  Who incurred the debt? Check one.  ☑ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  ☐ Check if this claim is for a community debt  Is the claim subject to offset?   | Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify service |             |

✓ No ☐ Yes

| Debtor 1 | Johnny E Barnes | Case number (if known) |
|----------|-----------------|------------------------|
|          |                 |                        |

## Part 3: List Others to Be Notified About a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

| Cash Store   |             |                       | On which entry in Part 1 or Part 2 did you list the original creditor?  |  |  |  |
|--|-------------|-----------------------|---|--|--|--|
| Name 641 Hurst, Ste B Number Street                  |             |                       | Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims |  |  |  |
| Center<br>City                                       | TX<br>State | <b>75935</b> ZIP Code | Last 4 digits of account number   |  |  |  |
| Lendmark Financial S                                 | vcs LLC     |                       | On which entry in Part 1 or Part 2 did you list the original creditor?  |  |  |  |
| Name<br>3009 S John Reddit Dr<br>Number Street       | r           |                       | Lineof (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims    |  |  |  |
| Lufkin<br>City                                       | TX<br>State | <b>75904</b> ZIP Code | Last 4 digits of account number   |  |  |  |
| Onemain Financial                                    |             |                       | On which entry in Part 1 or Part 2 did you list the original creditor?  |  |  |  |
| Name 3801 North Street Number Street Northview Plaza |             |                       | Lineof (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims    |  |  |  |
| Nacogdoches<br>City                                  | TX<br>State | <b>75965</b> ZIP Code | Last 4 digits of account number   |  |  |  |
| OneMain Financial Name                               |             |                       | On which entry in Part 1 or Part 2 did you list the original creditor?  |  |  |  |
| A206 S Medford, Ste C Number Street                  | •           |                       | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims   |  |  |  |
| Lufkin<br>City                                       | TX<br>State | <b>75901</b> ZIP Code | Last 4 digits of account number   |  |  |  |

## Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.
 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

|                          |     |   | Total claim                 |
|--------------------------|-----|---|-----------------------------|
| Total claims from Part 1 | 6a. | Domestic support obligations  | 6a. <b>\$0.00</b>           |
| nom rait i               | 6b. | Taxes and certain other debts you owe the government  | 6b. <b>\$0.00</b>           |
|                          | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. <b>\$0.00</b>           |
|                          | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | <sup>6d.</sup> +\$3,403.00  |
|                          | 6e. | <b>Total.</b> Add lines 6a through 6d.  | 6d. <b>\$3,403.00</b>       |
|                          |     |   | Total claim                 |
| Total claims from Part 2 | 6f. | Student loans   | 6f. <b>\$0.00</b>           |
|                          | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. <b>\$0.00</b>           |
|                          | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. <b>\$0.00</b>           |
|                          | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | <sup>6i.</sup> +\$24,826.00 |
|                          | 6j. | Total. Add lines 6f through 6i.   | 6j. <b>\$24,826.00</b>      |

| Fill in this inf   | ormation to iden     |                  |                  |  |                                    |  |  |
|--|----------------------|------------------|------------------|--|------------------------------------|--|--|
| Debtor 1   | Johnny<br>First Name | E<br>Middle Name | Barnes Last Name |  |                                    |  |  |
| Debtor 2<br>(Spouse, if filing)  | First Name           | Middle Name      | Last Name        |  |                                    |  |  |
| United States Bankruptcy Court for the: <b>EASTERN DISTRICT OF TEXAS</b> |                      |                  |                  |  |                                    |  |  |
| Case number (if known)   |                      |                  |                  |  | Check if this is an amended filing |  |  |

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

    Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

| E                 | ll in this inf                          | ormation to iden  | tify your case:   |   |  |   |       |
|-------------------|---|---|---|---|--|---|-------|
| De                | ebtor 1                                 | Johnny<br>First Name  | E<br>Middle News  | Barnes  |  |   |       |
|                   | ebtor 2                                 | First Name  | Middle Name   | Last Name   |  |   |       |
|                   | pouse, if filing)                       | First Name  | Middle Name   | Last Name   |  |   |       |
| Ur                | nited States Bar                        | nkruptcy Court for the  | : EASTERN DISTR   | ICT OF TEXAS  |  |   |       |
|                   | ase number<br>known)                    |   |   |   |  | Check if this is an                     |       |
| ("                | KIIOWII)                                |   |   |   |  | amended filing                          |       |
| ∩f                | ficial Form                             | 106H  |   |   |  |   |       |
|                   |   | Your Codebt   | ors   |   |  |   | 12/15 |
| _                 | nodalo II.                              | Tour oodobt   | 0.0   |   |  |   | 12/10 |
| two<br>nee<br>pag | married peopled, copy the e. On the top | le are filing together<br>Additional Page, fill<br>of any Additional Pa | , both are equally res<br>it out, and number th<br>ges, write your name | y debts you may have. Be sponsible for supplying cone entries in the boxes on te and case number (if know | rrect information. If n<br>the left. Attach the Ac<br>wn). Answer every qu | nore space is<br>Iditional Page to this |       |
| 1.                | No No                                   | any codebtors? (If  | you are filing a joint of   | case, do not list either spous  | e as a codebtor.)  |   |       |
|                   | Yes                                     |   |   |   |  |   |       |
| 2.                |   | •   | •   | r property state or territory<br>ew Mexico, Puerto Rico, Tex  | ` ' '  | •                                       |       |
|                   | No. Go t                                |   |   |   | 2  |   |       |
|                   | No Yes                                  |   | spouse, or legal equiv  | valent live with you at the tim   | ie?  |   |       |
| 3.                | person show creditor on S               | n in line 2 again as a  | codebtor only if tha<br>Form 106D), <i>Schedul</i>                      | e your spouse as a codebto<br>it person is a guarantor or<br>le E/F (Official Form 106E/F<br>olumn 2.     | cosigner. Make sure  | you have listed the                     |       |

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

| F                        | ill in this inform   | ation to identify  | your case:   |  |                   |                                |                |  |
|--------------------------|--|--|--|--|-------------------|--------------------------------|----------------|--|
|                          | Debtor 1   | Johnny   | Е  | Barnes   |                   |                                |                |  |
|                          |  | First Name   | Middle Name  | Last Name  |                   |                                | Che            | eck if this is:  |
|                          | Debtor 2<br>(Spouse, if filing)  | First Name   | Middle Name  | Last Name  |                   |                                |                | An amended filing  |
|                          | United States Bankru   | inter/ Court for the:  | FASTERN DI   | STRICT OF TEX  | ΔS                |                                |                | A supplement showing postpetition  |
|                          | Case number  | ipicy Court for the.   | LACILINID  | OTTO OT TEX  |                   |                                |                | chapter 13 income as of the following date:  |
|                          | (if known)   |  |  |  | _                 |                                |                | MM / DD / YYYY   |
| 0                        | fficial Form 10  | <u>61</u>  |  |  |                   |                                |                |  |
| So                       | chedule I: You   | ır Income  |  |  |                   |                                |                | 12/15  |
| res<br>inc<br>abo<br>you | sponsible for supply<br>clude information ab<br>out your spouse. If<br>ur name and case no | ing correct information out your spouse. It more space is need | ation. If you are<br>f you are separ<br>ded, attach a se<br>Answer every q | married and not<br>ated and your spo<br>parate sheet to th | filing<br>ouse is | jointly, and<br>s not filing v | your<br>with y | I Debtor 2), both are equally<br>spouse is living with you,<br>ou, do not include information<br>any additional pages, write |
| 1.                       | Fill in your employ information.   | ment   |  | Dalston  |                   |                                |                | Dalitan O annua (Illian annua)   |
|                          | If you have more th  | an one   |  | Debtor 1   |                   |                                |                | Debtor 2 or non-filing spouse  |
|                          | job, attach a separa   |  | yment status   | Employed   | 1                 |                                |                | Employed   |
|                          | with information ab<br>additional employe  | rs.  |  | ✓ Not employe  | au                |                                |                | ■ Not employed   |
|                          |  | Occup  | ation  |  |                   |                                |                | _  |
|                          | Include part-time, s<br>or self-employed w   |  | yer's name   | retired  |                   |                                |                |  |
|                          | Occupation may in  |  |  |  |                   |                                |                | _  |
|                          | Occupation may inc<br>student or homema<br>applies.  | Lilipio  | yer's address  | Number Street  |                   |                                |                | Number Street  |
|                          |  |  |  |  |                   |                                |                |  |
|                          |  |  |  | City   |                   | State Zip C                    | ode            | City State Zip Code  |
|                          |  | How Is   | and ampleyed the   | •  |                   | State Zip C                    | oue            | City State Zip Code  |
|                          |  |  | ong employed th  |  |                   |                                |                |  |
| i                        | Part 2: Give D   | etails About Mo  | nthly Incom  | 9  |                   |                                |                |  |
|                          | timate monthly inco<br>n-filing spouse unless  | -  | ou file this form  | If you have noth   | ing to            | report for ar                  | ny line        | , write \$0 in the space. Include your   |
|                          | ou or your non-filing s<br>u need more space, a  | •  |  | er, combine the info                                       | ormati            | on for all em                  | ploye          | rs for that person on the lines below. If  |
|                          |  |  |  |  |                   | For Debtor                     | 1              | For Debtor 2 or non-filing spouse  |
| 2.                       | List monthly gross<br>payroll deductions)<br>would be.                                     | s wages, salary, ar<br>. If not paid monthly                   |  |  | 2.                | \$                             | 0.00           |  |
| 3.                       | Estimate and list r  | monthly overtime p   | ay.  |  | 3. 4              | \$                             | 0.00           |  |
| 4.                       | Calculate gross in   | come. Add line 2   | ⊦ line 3.  |  | 4.                | \$                             | 0.00           |  |

| Deb     | otor 1 Johnny E Barnes   |  |                           | Case nu              | mber (i | if known)                     |         |            |
|---------|--|--|---------------------------|----------------------|---------|-------------------------------|---------|------------|
|         |  |  |                           | For Debtor 1         | For     | Debtor 2 or<br>n-filing spous | ——<br>е |            |
|         | Copy line 4 here   | <b>→</b>   | 4.                        | \$0.00               |         |                               | _       |            |
| 5.      | List all payroll deductions:   |  |                           |                      |         |                               |         |            |
|         | 5a. Tax, Medicare, and Social Secu   | urity deductions   | 5a.                       | \$0.00               | _       |                               |         |            |
|         | 5b. Mandatory contributions for re   | tirement plans   | 5b.                       | \$0.00               | _       |                               |         |            |
|         | 5c. Voluntary contributions for reti   | rement plans   | 5c.                       | \$0.00               | _       |                               |         |            |
|         | 5d. Required repayments of retirer   | nent fund loans  | 5d.                       | \$0.00               | _       |                               |         |            |
|         | 5e. Insurance  |  | 5e.                       | \$0.00               | _       |                               |         |            |
|         | 5f. Domestic support obligations   |  | 5f.                       | \$0.00               | _       |                               |         |            |
|         | 5g. Union dues   |  | 5g.                       | \$0.00               | _       |                               |         |            |
|         | 5h. Other deductions. Specify:   |  | 5h. <b>+</b>              | \$0.00               | _       |                               |         |            |
| 6.      | <b>Add the payroll deductions.</b> Add I 5g + 5h.  |  |                           | \$0.00               | _       |                               |         |            |
| 7.<br>0 | Calculate total monthly take-home  | •  | 7.                        | \$0.00               | _       |                               |         |            |
| 8.      | • •  | List all other income regularly received:  |                           |                      |         |                               |         |            |
|         | 8a. Net income from rental propert business, profession, or farm   | , ,  | 8a.                       | \$0.00               | _       |                               |         |            |
|         | Attach a statement for each prop<br>gross receipts, ordinary and nece<br>the total monthly net income.                 | ,  |                           |                      |         |                               |         |            |
|         | 8b. Interest and dividends   |  | 8b.                       | \$0.00               |         |                               |         |            |
|         | 8c. Family support payments that dependent regularly receive   | you, a non-filing spouse, or a   | 8c.                       | \$0.00               | =       |                               |         |            |
|         | Include alimony, spousal support divorce settlement, and property  |  |                           |                      |         |                               |         |            |
|         | 8d. Unemployment compensation  |  | 8d.                       | \$0.00               |         |                               |         |            |
|         | 8e. Social Security  |  | 8e.                       | \$0.00               | _       |                               |         |            |
|         | 8f. Other government assistance t  | hat you regularly receive  |                           |                      | _       |                               |         |            |
|         | Include cash assistance and the cash assistance that you receive (benefits under the Supplementa or housing subsidies. | , such as food stamps  |                           |                      |         |                               |         |            |
|         | Specify: VA benefits   |  |                           |                      |         |                               |         |            |
|         | 8g. Pension or retirement income   |  | - <sup>8f.</sup><br>- 8g. | \$3,057.13<br>\$0.00 | _       |                               |         |            |
|         | 8h. Other monthly income.  |  | og.                       | <u> </u>             | _       |                               |         |            |
|         | Specify:   |  | 8h. 🛨                     | \$0.00               |         |                               |         |            |
| 9.      | Add all other income. Add lines 8a   | + 8b + 8c + 8d + 8e + 8f + 8g + 8h.  | 9.                        | \$3,057.13           |         |                               | 7       |            |
| 10.     | Calculate monthly income. Add line   | e 7 + line 9.  | 10.                       | \$3,057.13           | +       |                               |         | \$3,057.13 |
|         | dd the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  |  |                           |                      |         |                               |         |            |
| 11.     | State all other regular contributions<br>Include contributions from an unmarrie<br>friends or relatives.               |  |                           |                      | ur roon | nmates, and o                 | ther    |            |
|         | Do not include any amounts already in  |  | ched                      |                      |         |                               |         |            |
|         | Specify:   |  |                           |                      |         | 11.                           | +       | \$0.00     |
| 12.     |  | the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly me. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, applies.  12. \$3,057.13  Combined monthly income |                           |                      |         |                               |         |            |
| 13.     | ·  |  |                           |                      |         |                               |         |            |
|         | · · ·  | s social security each month is  |                           |                      | osable  | income                        |         |            |
|         |  |  |                           |                      |         |                               |         |            |

| F    | ill in this inform                                 | nation to iden             | tify your case:                             |                 |  | <b>O</b> b | -1. :£ 4b-:- | . :                               |                                     |
|------|--|----------------------------|---|-----------------|--|------------|--------------|-----------------------------------|-------------------------------------|
|      | Debtor 1   | Johnny                     | E   | Barne           |  | l          | ck if this   | s is:<br>ended filing             |                                     |
| '    | Debtor 1   | First Name                 | Middle Name                                 | Last Nan        |  | $\  \ $    | A supp       | lement showing<br>r 13 expenses a |                                     |
|      | Debtor 2<br>(Spouse, if filing)                    | First Name                 | Middle Name                                 | Last Nan        | ne   |            |              | ng date:                          | s or the                            |
| ,    | United States Bankr                                | uptcy Court for th         | e: <b>EASTERN DIS</b>                       | TRICT OF T      | EXAS   |            | MM / D       | D / YYYY                          |                                     |
|      | Case number<br>(if known)                          |                            |   |                 | <u> </u>                                     |            | 1411417      | 2,                                |                                     |
| Of   | ficial Form 10                                     | )6J                        |   |                 |  | ,          |              |                                   |                                     |
| Sc   | hedule J: Yo                                       | —<br>our Expense           | es  |                 |  |            |              |                                   | 12/15                               |
| nan  | rect information. In                               | f more space is r          | needed, attach anoti<br>swer every question | ner sheet to th | ng together, both ar<br>nis form. On the top |            |              |                                   |                                     |
| 1.   | Is this a joint cas                                | e?                         |   |                 |  |            |              |                                   |                                     |
| 2.   | No   | s. Debtor 2 must rendents? | ·   | J-2, Expenses   | for Separate Housel  Dependent's relation    | onshi      |              | Dependent's                       | Does dependent                      |
|      | Debtor 2.  | i and —                    | for each depender                           | nt              | Debtor 1 or Debtor 2                         |            |              | age                               | live with you?  No                  |
|      | Do not state the de names.                         | ependents'                 |   |                 |  |            |              |                                   | Yes  No Yes  No Yes  No Yes  No Yes |
| 3.   | Do your expense expenses of peop yourself and your | ole other than             | ☑ No<br>☐ Yes                               |                 |  |            |              |                                   | │ No<br>│ Yes                       |
| P    | art 2: Estima                                      | ate Your Ongo              | oing Monthly Ex                             | penses          |  |            |              |                                   |                                     |
| to r |  | of a date after th         | e bankruptcy is file                        | -               | e using this form as<br>supplemental Sched   |            |              | -                                 |                                     |
|      |  |                            | sh government assi<br>on Schedule I: Your   |                 |  |            |              | Your expens                       | ses                                 |
| 4.   |  |                            | penses for your resi                        |                 |  |            |              | 4.                                | \$200.00                            |
|      | If not included in                                 | line 4:                    |   |                 |  |            |              |                                   |                                     |
|      | 4a. Real estate ta                                 | axes                       |   |                 |  |            |              | 4a                                |                                     |
|      | 4b. Property, hon                                  | neowner's, or rent         | er's insurance                              |                 |  |            |              | 4b                                |                                     |
|      | 4c. Home mainte                                    | nance, repair, and         | d upkeep expenses                           |                 |  |            |              | 4c                                | \$75.00                             |
|      | 4d. Homeowner's                                    | association or co          | ondominium dues                             |                 |  |            |              | 4d                                |                                     |

| Deb | tor 1 Johnny E Barnes   | Case number (if known) |          |
|-----|---|------------------------|----------|
|     |   | Your expense           | es       |
| 5.  | Additional mortgage payments for your residence, such as home equity loans  | 5                      |          |
| 6.  | Utilities:  |                        |          |
|     | 6a. Electricity, heat, natural gas  | 6a.                    | \$350.00 |
|     | 6b. Water, sewer, garbage collection  | 6b                     | \$145.00 |
|     | 6c. Telephone, cell phone, Internet, satellite, and cable services  | 6c                     | \$188.00 |
|     | 6d. Other. Specify: cell phone  | 6d                     | \$100.00 |
| 7.  | Food and housekeeping supplies  | 7.                     | \$280.00 |
| 8.  | Childcare and children's education costs  | 8.                     |          |
| 9.  | Clothing, laundry, and dry cleaning   | 9.                     |          |
| 10. | Personal care products and services   | 10.                    | \$60.00  |
| 11. | Medical and dental expenses   | 11.                    |          |
| 12. | <b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.  | 12.                    | \$300.00 |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books  | 13.                    |          |
| 14. | Charitable contributions and religious donations  | 14.                    |          |
| 15. | <b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.   |                        |          |
|     | 15a. Life insurance   | 15a                    | \$177.00 |
|     | 15b. Health insurance   | 15b                    |          |
|     | 15c. Vehicle insurance  | 15c                    | \$170.00 |
|     | 15d. Other insurance. Specify:  | 15d                    |          |
| 16. | <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:  | 16.                    |          |
| 17. | Installment or lease payments:  |                        |          |
|     | 17a. Car payments for Vehicle 1   | 17a                    |          |
|     | 17b. Car payments for Vehicle 2   | 17b                    |          |
|     | 17c. Other. Specify:  | 17c                    |          |
|     | 17d. Other. Specify:  | 17d.                   |          |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18.                    |          |

19. Other payments you make to support others who do not live with you. Specify:

19.

| Debtor 1 |       | Johnny E Barnes   | Case number (if known | )          |
|----------|-------|---|-----------------------|------------|
| 20.      |       | r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.   |                       |            |
|          | 20a.  | Mortgages on other property   | 20a.                  |            |
|          | 20b.  | Real estate taxes   | 20b.                  |            |
|          | 20c.  | Property, homeowner's, or renter's insurance  | 20c.                  |            |
|          | 20d.  | Maintenance, repair, and upkeep expenses  | 20d.                  |            |
|          | 20e.  | Homeowner's association or condominium dues   | 20e.                  |            |
| 21.      | Other | r. Specify: auto repair, oil changes, tires, registration   | 21. +                 | \$60.00    |
| 22.      | Calcu | alate your monthly expenses.  | _                     |            |
|          | 22a.  | Add lines 4 through 21.   | 22a.                  | \$2,105.00 |
|          | 22b.  | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-  | 2. 22b.               |            |
|          | 22c.  | Add line 22a and 22b. The result is your monthly expenses.  | 22c.                  | \$2,105.00 |
| 23.      | Calcu | ulate your monthly net income.  |                       |            |
|          | 23a.  | Copy line 12 (your combined monthly income) from Schedule I.  | 23a.                  | \$3,057.13 |
|          | 23b.  | Copy your monthly expenses from line 22c above.   | 23b. <b>_</b>         | \$2,105.00 |
|          | 23c.  | Subtract your monthly expenses from your monthly income. The result is your monthly net income.   | 23c.                  | \$952.13   |
| 24.      | Do yo | ou expect an increase or decrease in your expenses within the year after yo   | ou file this form?    |            |
|          |       | xample, do you expect to finish paying for your car loan within the year or do you<br>ent to increase or decrease because of a modification to the terms of your mort |                       |            |
|          | =     | No.   |                       |            |
|          | Ц,    | Yes. Explain here: None.  |                       |            |
|          |       |   |                       |            |
|          |       |   |                       |            |

| Debtor 1                            | Johnny                    | E   | Barnes   |                                 |                                  |
|-------------------------------------|---------------------------|---|--|---------------------------------|----------------------------------|
|                                     | First Name                | Middle Name                                       | Last Name  |                                 |                                  |
| Debtor 2                            | First Name                | Middle News                                       | Loct Nome  |                                 |                                  |
| Spouse, if filing)                  | FIRST Name                | Middle Name                                       | Last Name  |                                 |                                  |
| Inited States Ba                    | nkruptcy Court fo         | or the: <b>EASTERN DIS</b>                        | STRICT OF TEXAS  |                                 |                                  |
| ase number                          |                           |   |  | ☐ Check if                      | f this is an                     |
| f known)                            |                           |   |  | amende                          | ed filing                        |
| fficial Form                        | 106Sum                    |   |  |                                 |                                  |
| ummarv of                           | Your Ass                  | ets and Liabilit                                  | ties and Certain Stati   | stical Information              | 12                               |
| rrect information hedules after you | on. Fill out all of       | f your schedules first;<br>inal forms, you must f | ed people are filing together, be<br>; then complete the information<br>fill out a new Summary and che | on this form. If you are filing | g amended                        |
|                                     |                           |   |  |                                 | <b>.</b>                         |
|                                     |                           |   |  |                                 | Your assets Value of what you ow |
| Schedule A/B                        | : Property (Offici        | al Form 106A/B)                                   |  |                                 | ,                                |
| 1a. Copy line                       | e 55, Total real e        | state, from Schedule A                            | /B   |                                 | \$0.0                            |
|                                     |                           |   |  |                                 |                                  |
| 1b. Copy line                       | e 62, Total persor        | nal property, from Sche                           | edule A/B  |                                 | \$42,621.6                       |
|                                     |                           |   |  | 1                               | \$40,004.0                       |
| 1c. Copy line                       | € 63, Total of all p      | property on Schedule A                            | \/B  |                                 | \$42,621.6                       |
| Part 2: Su                          | mmarize You               | ır Liabilities                                    |  |                                 |                                  |
|                                     |                           |   |  |                                 |                                  |
|                                     |                           |   |  |                                 | Your liabilities Amount you owe  |
| Calcadula D. (                      | Oue elite un 14/1- e 1.1. | and Olainea Carrinal bus                          | Duran anti- (Official Forms 400D)  |                                 | ranount you owe                  |
|                                     |                           |   | Property (Official Form 106D) If claim, at the bottom of the last p                                    | page of Part 1 of Schedule D    | \$50,065.8                       |
| Schedule E/F                        | : Creditors Who           | Have Unsecured Claim                              | as (Official Form 106E/F)  |                                 |                                  |
|                                     |                           |   | ured claims) from line 6e of Sche  | dule E/F                        | \$3,403.0                        |
|                                     |                           |   |  |                                 |                                  |
| 3b. Copy the                        | total claims fron         | n Part 2 (nonpriority uns                         | secured claims) from line 6j of So   | chedule E/F                     | + \$24,826.0                     |
|                                     |                           |   |  |                                 |                                  |
|                                     |                           |   |  | Your total liabilities          | \$78,294.8                       |
|                                     |                           |   |  |                                 |                                  |
| Part 3: Su                          | mmarize You               | ır Income and Exp                                 | nenses   |                                 |                                  |
| Ju                                  | iiiiiaiize i ou           | micome and Exp                                    | /U13G3   |                                 |                                  |
|                                     |                           |   |  |                                 |                                  |
|                                     | our Income (Offic         |   | Oak adda I   |                                 | \$3 <b>057</b> 1                 |
|                                     |                           |   | Schedule I   |                                 | \$3,057.1                        |

Copy your monthly expenses from line 22c of Schedule J.....

\$2,105.00

| Deb | otor 1 | Johnny E Barnes  | Case number (if known)                |                      |
|-----|--------|--|---------------------------------------|----------------------|
| Ρ   | art 4: | Answer These Questions for Administrative and Statist  | ical Records                          |                      |
| 6.  | Are yo | ou filing for bankruptcy under Chapters 7, 11, or 13?  |                                       |                      |
|     | _      | o. You have nothing to report on this part of the form. Check this box and ses   | submit this form to the court with yo | our other schedules. |
| 7.  | What I | kind of debt do you have?  |                                       |                      |
|     | Ľ      | our debts are primarily consumer debts. Consumer debts are those "incamily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for state                     |                                       | •                    |
|     | ш      | <b>our debts are not primarily consumer debts.</b> You have nothing to report is form to the court with your other schedules.  | on this part of the form. Check this  | s box and submit     |
| 8.  |        | the <b>Statement of Your Current Monthly Income:</b> Copy your total current r<br>I Form 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14. | •                                     | \$3,057.13           |
| 9.  | Copy   | the following special categories of claims from Part 4, line 6 of Schedu   | le E/F:                               |                      |
|     |        |  | Total claim                           |                      |
|     | From I | Part 4 on Schedule E/F, copy the following:  |                                       |                      |
|     | 9a. D  | omestic support obligations. (Copy line 6a.)   | \$0.0                                 | 00_                  |
|     | 9h T   | axes and certain other debts you owe the government (Copy line 6b.)  | \$0.0                                 | 00                   |

9b. Taxes and certain other debts you owe the government. (Copy line 6b.)

9d. Student loans. (Copy line 6f.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

| Fill in this inf                | ormation to        | identify your case         | :                            |   |       |
|---------------------------------|--------------------|----------------------------|------------------------------|---|-------|
| Debtor 1                        | Johnny             | E                          | Barnes                       |   |       |
|                                 | First Name         | Middle Name                | Last Name                    |   |       |
| Debtor 2<br>(Spouse, if filing) | First Name         | Middle Name                | Last Name                    | -   |       |
| United States Bar               | nkruptcy Court fo  | or the: <b>EASTERN DIS</b> | TRICT OF TEXAS               | _   |       |
| Case number<br>(if known)       |                    |                            |                              | Check if this is an amended filing  |       |
| Official Form                   | 106Dec             |                            |                              |   |       |
| Declaration                     | About an           | Individual Debt            | or's Schedules               |   | 12/15 |
| If two married peo              | pple are filing to | gether, both are equa      | lly responsible for supplyir | ng correct information.   |       |
| concealing proper               | rty, or obtaining  | money or property by       |                              | edules. Making a false statement,<br>a bankruptcy case can result in fines up to<br>19, and 3571. |       |
| Sig                             | ın Below           |                            |                              |   |       |
| Did you pay (                   | or agree to nav    | someone who is NOT         | an attorney to beln you fill | out hankruntey forms?   |       |

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are

Date

X /s/ Johnny E Barnes
Johnny E Barnes, Debtor 1

Signature of Debtor 2

Date <u>06/14/2019</u> MM / DD / YYYY

**☑** No

Yes. Name of person

true and correct.

MM / DD / YYYY

Attach Bankruptcy Petition Preparer's Notice,

Declaration, and Signature (Official Form 119).

| Fill in this in   | nformation to i      | dentify your case          | :                           |  |       |
|-------------------|----------------------|----------------------------|-----------------------------|--|-------|
| Debtor 1          | Johnny               | E                          | Barnes                      |  |       |
|                   | First Name           | Middle Name                | Last Name                   |  |       |
| Debtor 2          |                      |                            |                             |  |       |
| (Spouse, if filin | g) First Name        | Middle Name                | Last Name                   |  |       |
| United States E   | Bankruptcy Court fo  | or the: <b>EASTERN DIS</b> | TRICT OF TEXAS              | _  |       |
| Case number       |                      |                            |                             |  |       |
| (if known)        |                      |                            |                             | Check if this is an amended filing   |       |
| Official For      | m 107                |                            |                             |  |       |
|                   |                      | Affaira far Ind            | ividuala Eilina far         | Ponkruntov   | 04/19 |
| Statement         | OI FIIIAIICIA        | Allali'S lor lilu          | ividuals Filing for         | Банкгирісу   | 04/19 |
| your name and     | case number (if k    | nown). Answer every        | •                           | n. On the top of any additional pages, write   |       |
| 1. What is vou    | ur current marital   | etatue?                    |                             |  |       |
| ☐ Married         |                      | status :                   |                             |  |       |
| ☑ Not mai         | rried                |                            |                             |  |       |
| 2. During the     | last 3 years, have   | you lived anywhere o       | other than where you live n | now?   |       |
| <b>☑</b> No       |                      |                            | •                           |  |       |
| Yes. Li           | st all of the places | you lived in the last 3 y  | ears. Do not include where  | you live now.  |       |
| (Community        | •                    | •                          | • .                         | a community property state or territory?<br>iisiana, Nevada, New Mexico, Puerto Rico, Texas, |       |
| <b>☑</b> No       |                      |                            |                             |  |       |
| ☐ Yes. M          | ake sure you fill ou | it Schedule H: Your Co     | debtors (Official Form 106H | ).   |       |

| Deb  | otor 1            | Johnny E Barnes  |  | Case nu  | mber (if known)                                       |  |  |  |
|--|-------------------|--|--|--|---|--|--|--|
| Р  | art 2:            | Explain the Sources of   | Your Income  |  |   |  |  |  |
| 4.   | Fill in th        | ne total amount of income you rec  | eyment or from operating a business during this year or the two previous calendar years? exceived from all jobs and all businesses, including part-time activities. We income that you receive together, list it only once under Debtor 1. |  |   |  |  |  |
| <ul><li>✓ No</li><li>✓ Yes. Fill in the details.</li></ul> |                   |  |  |  |   |  |  |  |
| 5.   | Include<br>unempl | I receive any other income during income regardless of whether that oyment; and other public benefit publing and lottery winnings. If you 1. | at income is taxable. Examp<br>payments; pensions; rental in   | oles of other income are ncome; interest; dividen                        | alimony; child support; S<br>ds; money collected from | lawsuits; royalties;   |  |  |
|  | List ead          | ch source and the gross income fr  | om each source separately.   | Do not include income  | that you listed in line 4.                            |  |  |  |
|  | □ No ✓ Yes        | s. Fill in the details.  |  |  |   |  |  |  |
|  |                   |  | Debtor 1   |  | Debtor 2  |  |  |  |
|  |                   |  | Sources of income<br>Describe below.   | Gross income<br>from each source<br>(before deductions<br>and exclusions | Sources of income<br>Describe below.                  | Gross income<br>from each source<br>(before deductions<br>and exclusions |  |  |
| Fro  | m lanus           | ry 1 of the current year until   | SOCIAL SECURITY  | \$5,190.00   |   |  |  |  |
|  |                   | u filed for bankruptcy:  | VA Pension   | \$18,342.78  |   |  |  |  |
| For  | the last          | calendar year:   | social security  | \$12,168.00  |   |  |  |  |
| (Jai   | nuary 1 to        | D December 31, 2018 )  | VA Pension   | \$36,685.56  |   |  |  |  |
| For  | the cale          | ndar year before that:   | social security  | \$12,168.00  |   |  |  |  |
| (January 1 to December 31, 2017 )                          |                   |  | VA Pension   | \$36,685.56<br>  |   |  |  |  |

| Debtor 1                   | Johnny E Barnes       |      |                       |                    |                                       | Case number (if know   | vn)   |
|----------------------------|-----------------------|------|-----------------------|--------------------|---------------------------------------|--|---|
| D. 10                      | luu oo aas oo         |      |                       | la la Data da la   |                                       |  |   |
| Part 3:                    |                       | _    |                       |                    | You Filed for Ba                      | ankruptcy  |   |
| 6. Are eith                | ner Debtor 1's or Deb | tor  | 2's debts prir        | narily consume     | r debts?                              |  |   |
| ☐ No.                      |                       |      |                       |                    | mer debts. Consumily, or household pu |  | d in 11 U.S.C. § 101(8) as  |
|                            | During the 90 days    | s be | efore you filed f     | or bankruptcy, d   | id you pay any credit                 | tor a total of \$6,825*  | or more?  |
|                            | ☐ No. Go to line      | 7.   |                       |                    |                                       |  |   |
|                            | total amo             | unt  | you paid that o       | creditor. Do not i | include payments for                  | more in one or more produced in the comestic support of attorney for this bank | oligations, such as   |
|                            | * Subject to adjust   | me   | nt on 4/01/22 a       | nd every 3 years   | after that for cases                  | filed on or after the o  | late of adjustment.   |
| <b>√</b> Yes               | . Debtor 1 or Debto   | or 2 | or both have          | primarily consu    | ımer debts.                           |  |   |
| _                          | During the 90 days    | s be | efore you filed f     | or bankruptcy, d   | id you pay any credit                 | tor a total of \$600 or  | more?   |
|                            | ☐ No. Go to line      | 7.   |                       |                    |                                       |  |   |
|                            | creditor.             | Do   | not include pag       | yments for dome    |                                       | re and the total amou<br>ons, such as child su<br>case.                        |   |
|                            |                       |      |                       | Dates of payment   | Total amount paid                     | Amount you still owe   | Was this payment for  |
| Conn's Ho                  |                       |      |                       |                    | \$932.00                              | \$10,368.00  | _ Mortgage  |
| Creditor's name Attn: Bank | ·<br>ruptcy Dept      |      |                       | monthly            |                                       |  | ☐ Car<br>☐ Credit card  |
| Number Street              |                       |      |                       | _                  |                                       |  | Loan repayment  |
| _                          | <u>55</u><br>T)       |      | 77704                 |                    |                                       |  | ☐ Suppliers or vendors ☐ Other                                    |
| Beaumont<br>City           | Sta                   |      | ZIP Code              | <u> </u>           |                                       |  | ✓ Other   |
|                            |                       |      |                       | Dates of payment   | Total amount paid                     | Amount you still owe   | Was this payment for  |
| Regional A                 | cceptance Co          |      |                       |                    | \$690.00                              | \$3,557.00   | _   |
| Attn: Bank                 |                       |      |                       | monthly            |                                       |  | ☑ Car<br>☐ Credit card  |
| Number Str                 |                       |      |                       |                    |                                       |  | Loan repayment  |
| PO Box 14                  | 87                    |      |                       |                    |                                       |  | Suppliers or vendors  |
| Wilson<br>City             | No.                   |      | <b>27894</b> ZIP Code |                    |                                       |  | Other   |
| Gity                       | Sie                   | iie  | ZIF Code              | Dates of payment   | Total amount paid                     | Amount you still owe   | Was this payment for  |
| Doches Cr                  |                       |      |                       |                    | \$2,055.00                            | \$30,140.82  | _ Mortgage  |
| Creditor's name            |                       |      |                       | <br>monthly        |                                       |  | Car   |
| 920 N.W. S                 | tallings Dr<br>eet    |      |                       | _                  |                                       |  | Credit card   |
|                            |                       |      |                       |                    |                                       |  | <ul><li>☐ Loan repayment</li><li>☐ Suppliers or vendors</li></ul> |
| Nacogdoci                  | nes T)                | (    | 75961                 |                    |                                       |  | Other   |
| City                       | Sta                   |      | ZIP Code              |                    |                                       |  |   |

| Deb | tor 1                            | Johnny E Barnes  | Case number (if known)  |
|-----|----------------------------------|--|---|
| 7.  | Insiders<br>corpora<br>agent, in | I year before you filed for bankruptcy, did you make a payment on a definctude your relatives; any general partners; relatives of any general partners of which you are an officer, director, person in control, or owner of 20% including one for a business you operate as a sole proprietor. 11 U.S.C. § 1 child support and alimony. | ers; partnerships of which you are a general partner;<br>% or more of their voting securities; and any managing |
|     | ✓ No<br>☐ Yes                    | . List all payments to an insider.   |   |
| 8.  |                                  | I year before you filed for bankruptcy, did you make any payments or ted an insider?   | transfer any property on account of a debt that   |
|     | Include                          | payments on debts guaranteed or cosigned by an insider.  |   |
|     | ✓ No<br>☐ Yes                    | . List all payments that benefited an insider.   |   |
| P   | art 4:                           | Identify Legal Actions, Repossessions, and Foreclosure   | es  |
| 9.  | List all s                       | I year before you filed for bankruptcy, were you a party in any lawsuit, such matters, including personal injury cases, small claims actions, divorce ations, and contract disputes.   |   |
|     | ✓ No<br>☐ Yes                    | . Fill in the details.   |   |
| 10. | seized,                          | I year before you filed for bankruptcy, was any of your property repose or levied? Ill that apply and fill in the details below.   | sessed, foreclosed, garnished, attached,  |
|     | -                                | Go to line 11.  Fill in the information below.   |   |
| 11. |                                  | 90 days before you filed for bankruptcy, did any creditor, including a b<br>s from your accounts or refuse to make a payment because you owed  | •   |
|     | ✓ No<br>☐ Yes                    | . Fill in the details.   |   |
| 12. |                                  | I year before you filed for bankruptcy, was any of your property in the s, a court-appointed receiver, a custodian, or another official?   | possession of an assignee for the benefit of  |
|     | ✓ No<br>☐ Yes                    |  |   |

| Deb  | otor 1                | Johnny E Ba                        | arnes          | 5                 |  | Case number (if k    | nown)                                   |                   |
|------|-----------------------|------------------------------------|----------------|-------------------|--|----------------------|---|-------------------|
| Р    | art 5:                | List Certa                         | in Gi          | ifts and Co       | ntributions  |                      |   |                   |
| 13.  | Within                | 2 years before                     | you f          | filed for bankr   | uptcy, did you give any gifts with a t   | otal value of more   | than \$600 per perso                    | n?                |
|      | ✓ No<br>☐ Yes         | s. Fill in the det                 | tails fo       | or each gift.     |  |                      |   |                   |
| 14.  |                       | 2 years before<br>charity?         | you f          | filed for bankr   | uptcy, did you give any gifts or cont  | ributions with a tot | al value of more tha                    | n \$600           |
|      | ✓ No<br>☐ Yes         | s. Fill in the det                 | tails fo       | or each gift or c | contribution.  |                      |   |                   |
| P    | art 6:                | List Certa                         | in Lo          | osses             |  |                      |   |                   |
| 15.  |                       | 1 year before y<br>isaster, or gan |                |                   | ptcy or since you filed for bankrupto  | cy, did you lose any | thing because of the                    | eft, fire,        |
|      | ✓ No<br>☐ Yes         | s. Fill in the det                 | tails.         |                   |  |                      |   |                   |
| Р    | art 7:                | List Certa                         | in Pa          | ayments or        | Transfers  |                      |   |                   |
| 16.  | anyone<br>Include     | you consulte                       | <b>d abo</b> o | ut seeking bai    | ptcy, did you or anyone else acting nkruptcy or preparing a bankruptcy oreparers, or credit counseling agencie | petition?            |   | -                 |
|      | David S               | stephens                           |                |                   | Description and value of any property transferred court costs \$310, counseling/fin fees \$55; CR              |                      | Date payment<br>or transfer was<br>made | Amount of payment |
|      | O. Box 4              |                                    |                |                   | s33, atty fees \$97= total paid \$   | 490                  | 06/13/2019-fee                          | \$97.00           |
|      | nber Stre<br>B E Denr | eet<br>man Ave                     |                |                   | -  |                      |   |                   |
| _    | kin                   |                                    | ГХ             | 75901             | _  |                      |   |                   |
| City |                       | \$                                 | State          | ZIP Code          |  |                      |   |                   |
| Ema  | ail or websit         | te address                         |                |                   | -  |                      |   |                   |
| Pers | son Who M             | lade the Payment                   | , if Not       | You               | -  |                      |   |                   |
| 17.  | anyone                | who promise                        | d to h         | elp you deal v    | ptcy, did you or anyone else acting<br>vith your creditors or to make payme<br>t you listed on line 16.        |                      |   | erty to           |
|      | ✓ No<br>☐ Yes         | s. Fill in the det                 | tails.         |                   |  |                      |   |                   |

| Debtor 1 |  | Johnn        | y E Barnes                                      |   | Case number (if known) |             |   |                       |
|----------|--|--------------|---|---|------------------------|-------------|---|-----------------------|
| 18.      |  | •            | •   | oankruptcy, did you so<br>course of your busin    | -                      | •           | se transfer any property to anyone, o     | ther than             |
|          |  |              | J   | insfers made as securit<br>you have already liste | •                      | 0 0         | f a security interest or mortgage on your | property).            |
|          | ✓ No   | s. Fill in   | the details.                                    |   |                        |             |   |                       |
| 19.      |  | -            | •   | bankruptcy, did you to                            |                        |             | y to a self-settled trust or similar devi | ce of which           |
|          | ✓ No<br>☐ Yes  | s. Fill in   | the details.                                    |   |                        |             |   |                       |
| P        | art 8:   | List         | Certain Financia                                | l Accounts, Instru                                | ments,                 | Safe Dep    | osit Boxes, and Storage Units             |                       |
| 20.      | 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? |              |   |   |                        |             |   | r your                |
|          |  |              |   | arket, or other financial associations, and other |                        |             | of deposit; shares in banks, credit unio  | ns, brokerage         |
|          | ✓ No<br>☐ Yes  | s. Fill in   | the details.                                    |   |                        |             |   |                       |
| 21.      | -  |              | ave, or did you have v<br>cash, or other valuat | •   | ou filed f             | or bankrupt | cy, any safe deposit box or other dep     | ository               |
|          | □ No ☑ Yes   | s. Fill in   | the details.                                    |   |                        |             |   |                       |
|          |  |              |   | Who else had acce                                 | ss to it?              |             | Describe the contents                     | Do you still have it? |
| Tex      | as BAn   | k and        | Trust   | daughter-Geneer                                   | n Barne                | S           | papers, nothing of value                  | □ No                  |
| Nam      | e of Finan   | cial Institu | ition   | Name  |                        |             | _   | <b>✓</b> Yes          |
| Num      | ber Str  | reet         |   | Number Street                                     |                        |             | _   |                       |
|          | n Augus  | stin         | TX  | Nacogdoches                                       | TX                     | 75961       | _   |                       |
| City     |  |              | State ZIP Code                                  | City  | State                  | ZIP Code    |   |                       |
| 22.      | <b>☑</b> No  |              | ed property in a stora                          | ge unit or place other                            | than yo                | ur home wit | hin 1 year before you filed for bankru    | ptcy?                 |

| Deb | tor 1           | Johnny E Barnes   | Case number (if known)                         |
|-----|-----------------|---|--|
| P   | art 9:          | Identify Property You Hold or Control for Someone Else  | •  |
| 23. |                 | hold or control any property that someone else owns? Include any prin trust for someone.  | operty you borrowed from, are storing for,     |
|     | ✓ No<br>☐ Yes   | s. Fill in the details.   |  |
| P   | art 10:         | Give Details About Environmental Information  |  |
| For | the purp        | ose of Part 10, the following definitions apply:  |  |
| ŀ   | nazardoι        | nental law means any federal, state, or local statute or regulation conc<br>us or toxic substance, wastes, or material into the air, land, soil, surfac<br>g statutes or regulations controlling the cleanup of these substances, v | e water, groundwater, or other medium,         |
|     |                 | ns any location, facility, or property as defined under any environmen<br>or used to own, operate, or utilize it, including disposal sites.   | tal law, whether you now own, operate, or      |
|     |                 | us material means anything an environmental law defines as a hazard<br>e, hazardous material, pollutant, contaminant, or similar item.  | ous waste, hazardous substance, toxic          |
| Rep | ort all no      | otices, releases, and proceedings that you know about, regardless of v  | when they occurred.                            |
| 24. | Has any<br>law? | y governmental unit notified you that you may be liable or potentially li   | able under or in violation of an environmental |
|     | ✓ No<br>☐ Yes   | s. Fill in the details.   |  |
| 25. | ☑ No            | ou notified any governmental unit of any release of hazardous materials. Fill in the details.   | ?  |
| 26. | Have you        | ou been a party in any judicial or administrative proceeding under any  | environmental law? Include settlements and     |
|     | ✓ No<br>☐ Yes   | s. Fill in the details.   |  |

| Deb           | tor 1             | Johnny E Barnes  |  | Case number (if known)  |
|---------------|-------------------|--|--|---|
| Pa            | art 11:           | Give Details About Your Business   | s or Connections to A                              | any Business  |
| 27.           | Within<br>busine  | 4 years before you filed for bankruptcy, did ss?   | you own a business or ha                           | eve any of the following connections to any   |
|               |                   | A sole proprietor or self-employed in a trade, A member of a limited liability company (LLC A partner in a partnership An officer, director, or managing executive of An owner of at least 5% of the voting or equit | ) or limited liability partners<br>f a corporation | hip (LLP)   |
|               | <u> </u>          | . None of the above applies. Go to Part 12. s. Check all that apply above and fill in the details.   | ails below for each busines                        | s.  |
| 28.           |                   | 2 years before you filed for bankruptcy, did ncial institutions, creditors, or other parties.  |  | ment to anyone about your business? Include   |
|               | □ No              | s. Fill in the details below.  |  |   |
| Pa            | art 12:           | Sign Below   |  |   |
| that<br>prop  | answer<br>erty by | the answers on this Statement of Financial As are true and correct. I understand that ma fraud in connection with a bankruptcy case U.S.C. §§ 152, 1341, 1519, and 3571.   | aking a false statement, co                        |   |
| X /           | s/ Johr           | iny E Barnes X   | Signature of Debtor 2                              |   |
| J             | ohnny E           | Barnes, Debtor 1   | Signature of Debtor 2                              |   |
| C             | Date _            | 06/14/2019   | Date   |   |
| Did           | you atta          | ach additional pages to Your Statement of Fi   | nancial Affairs for Individ                        | uals Filing for Bankruptcy (Official Form 107)?   |
|               |                   |  |  |   |
| Did           | you pay           | or agree to pay someone who is not an atto   | orney to help you fill out b                       | ankruptcy forms?  |
| $   \sqrt{} $ |                   |  |  |   |
|               | Yes. Na           | ame of person  |  | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
   Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liquidation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

| + | \$75  | filing fee<br>administrative fee<br>trustee surcharge |
|---|-------|---|
| , | \$335 | total fee   |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

| + |         | filing fee<br>administrative fee |
|---|---------|----------------------------------|
|   | \$1,717 | total fee                        |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

| + |       | filing fee<br>administrative fee |
|---|-------|----------------------------------|
|   | \$275 | total fee                        |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

## Chapter 13: Repayment plan for individuals with regular income

| + |       | filing fee<br>administrative fee |
|---|-------|----------------------------------|
|   | \$310 | total fee                        |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers.
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

# Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

## Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html.

In Alabama and North Carolina, go to:

 $\frac{http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/Bankruptcy/Resources/ApprovedCreditAndDebtCounselors.aspx.}{}$ 

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF TEXAS LUFKIN DIVISION

IN RE: Johnny E Barnes CASE NO

CHAPTER 13

#### **VERIFICATION OF CREDITOR MATRIX**

|      | The above named Debtor hereby verifies that the | e attached | list of creditors is true and correct to the best of his/her |
|------|---|------------|--|
| know | ledge.  |            |  |
|      |   |            |  |
|      |   |            |  |
|      |   |            |  |
| Date | 6/14/2019                                       | Signature  | /s/ Johnny E Barnes  |
|      |   |            | Johnny E Barnes  |
|      |   |            |  |
|      |   |            |  |

Aarons Sales & Lease Ownership 717 N University Dr Nacogdoches, TX 75961

Ad Astra Recovery 7330 West 33rd Street North Suite 118 Wichita, KS 67205

Allied Interstate Llc Attn: Bankruptcy Department PO Box 361477 Columbus, OH 43236

Attorney General of Texas Box 12548, Capitol Station Austin, TX 78711

Capital One Attn: Bankruptcy PO Box 30285 Salt Lake City, UT 84130

Carey Ebert Chapter 13 Trustee 110 N College Ste 1200 Tyler, TX 75702

Cash Store 641 Hurst, Ste B Center, TX 75935

CenterPoint Energy, Inc Attn: Bankruptcy PO Box 4981 Houston, TX 77210

Comenity Bank/Blair Attn: Bankruptcy PO Box 182125 Columbus, OH 43218 Conn's HomePlus
Attn: Bankruptcy Dept
PO Box 2358
Beaumont, TX 77704

Diversified Consultants, Inc. Attn: Bankruptcy PO Box 679543 Dallas, TX 75267

Doches Credit Union 920 N.W. Stallings Dr Nacogdoches, Texas 75961

ERC/Enhanced Recovery Corp Attn: Bankruptcy 8014 Bayberry Road Jacksonville, FL 32256

I C System Inc Attn: Bankruptcy PO Box 64378 St Paul, MN 55164

Internal Revenue Service Tyler Division Case Only 3372 S/SW Loop 323 Tyler, TX 75701

IRS
Internal Revenue Service
PO Box 7346
Philadelphia, PA 19101-7346

IRS
1919 Smith St
Mail Stop 5024 HOU
Houston, TX 77002

Lendmark Financial Services 1735 North Brown Road Suite 300 Lawrenceville, GA 30043 Lendmark Financial Svcs LLC 3009 S John Reddit Dr Lufkin, TX 75904

National Credit Adjusters, LLC 327 West 4th Avenue PO Box 3023 Hutchinson, KS 67504

OneMain Financial Attn: Bankruptcy 601 NW 2nd St #300 Evansville, IN 47708

OneMain Financial 4206 S Medford, Ste C Lufkin, TX 75901

Onemain Financial 3801 North Street Northview Plaza Nacogdoches, TX 75965

Regional Acceptance Co Attn: Bankruptcy PO Box 1487 Wilson, NC 27894

RMP ST Lukes Health Attn: Bankruptcy PO Box 21626 Waco, TX 76702

State Comptroller Public Accts Capitol Station Austin, TX 78774

Texas Workforce Commission PO Box 149080 Austin, TX 78714-9080 TXU/Texas Energy Attn: Bankruptcy PO Box 650393 Dallas, TX 75265

U. S. Trustee EDTX 300 Plaza Tower 110 N. College Ave Tyler, TX 75702

United States Attorney BMT 350 Magnolia Ave, Ste 150 Beaumont, TX 77701-2248

W. David Stephens
P. O. Box 444
103 E Denman Ave
Lufkin, Texas 75901

| F       | ill in this inf                                  | ormation to ident  | ify your case:  |   |   | Check as  | directed in lines 17  | and 21:                  |
|---------|--|--|---|---|---|---|---|--------------------------|
| D       | ebtor 1  | Johnny<br>First Name   | E<br>Middle Name  | Barnes<br>Last Name   |   | According to Statement:                                     | the calculations required   | by this                  |
|         | ebtor 2<br>Spouse, if filing)                    | First Name   | Middle Name   | Last Name   |   |   | ble income is not determine U.S.C. § 1325(b)(3).  | ined                     |
| U       | nited States Ba                                  | nkruptcy Court for the:  | EASTERN DIST  | TRICT OF TEXAS  | <u> </u>                                  |   | ble income is determined<br>I U.S.C. § 1325(b)(3).  | I                        |
|         | ase number<br>known)                             |  |   |   |   | —   | nmitment period is 3 years  |                          |
| ∟<br>Of | ficial Form                                      | 122C-1   |   |   |   | Check if th   | nis is an amended filing  |                          |
| Cr      | napter 13  | Statement of Y   |   |   | ome                                       |   |   | 12/1                     |
| info    | urate. If more principles                        | nd accurate as possib<br>space is needed, atta<br>es. On the top of any<br>culate Your Avera                     | ich a separate sh<br>additional pages                         | eet to this form. In<br>, write your name                             | nclude the                                | line number to w  |   |                          |
| 1.      | What is your                                     | marital and filing stat  | us? Check one or  | nly.  |   |   |   |                          |
|         | Not mar  | r <b>ied.</b> Fill out Column A  | , lines 2-11.   | •   |   |   |   |                          |
|         | _  | Fill out both Columns  | A and B, lines 2-1  | 11.   |   |   |   |                          |
|         | bankruptcy c<br>August 31. If<br>in the result.  | ase. 11 U.S.C. § 1010 the amount of your mo  | (10A). For examp nthly income varied to more amount more      | le, if you are filing or<br>ed during the 6 mon<br>than once. For exa | n Septemb<br>ths, add the<br>ample, if bo | er 15, the 6-mont<br>income for all 6<br>th spouses own the | nonths before you file the horizon would be March months and divide the to the same rental property, space. | 1 through tal by 6. Fill |
|         |  |  |   |   |   | Column A Debtor 1   | Column B Debtor 2 or non-filing spouse  |                          |
| 2.      |  | rages, salary, tips, bo  | nuses, overtime,  | and commissions   |   | \$0.00  |   |                          |
| 3.      | Alimony and                                      | maintenance paymen   | ts. Do not includ   | e payments from a   | spouse.                                   | \$0.00  |   |                          |
| 4.      | expenses of y<br>regular contrib<br>your depende | from any source whice you or your depender outions from an unmarrents, parents, and room ot include payments you | nts, including chil<br>ied partner, memb<br>mates. Do not inc | Id support. Include<br>pers of your househ<br>clude payments fron     | old,                                      | \$0.00  |   |                          |
| 5.      | Net income fr                                    | om operating a busir   | ess, profession,  | or farm   |   |   |   |                          |
|         |  |  | Debtor 1  | Debtor 2  |   |   |   |                          |
|         | Gross receipts deductions)                       | s (before all  | \$0.00  |   |   |   |   |                          |
|         | Ordinary and expenses                            | necessary operating -  | \$0.00  |   | Сору                                      |   |   |                          |
|         | Net monthly in profession, or                    | ncome from a business<br>farm  | \$0.00  |   | here ->                                   | \$0.00  |   |                          |

| Deb | tor 1                | Johnny E Barnes  |   |  | с              | ase number (if k  | known)                                  |                |
|-----|----------------------|--|---|--|----------------|-------------------|---|----------------|
|     |                      |  |   |  |                | Column A Debtor 1 | Column B  Debtor 2 or non-filing spouse |                |
| 6.  | Net                  | income from rental and other i   | eal property  |  |                |                   |   | _              |
|     | ded<br>Ord<br>exp    | ss receipts (before all uctions) inary and necessary operating enses monthly income from rental or   | Debtor 1<br>\$0.00<br>- \$0.00<br>\$0.00  | Debtor 2                                 | Copy<br>here → | \$0.00            |   |                |
|     |                      | er real property   |   |  |                |                   |   |                |
| 7.  | Inte                 | rest, dividends, and royalties   |   |  |                | \$0.00            |   |                |
| 8.  |                      | employment compensation  |   |  |                | \$0.00            |   |                |
|     |                      | not enter the amount if you conte<br>efit under the Social Security Act  |   |  |                |                   |   |                |
|     | F                    | For you  |   | \$0.                                     | 00             |                   |   |                |
|     | F                    | For your spouse  |   |  |                |                   |   |                |
| 9.  |                      | sion or retirement income. Do<br>a benefit under the Social Secu   |   | ount received that                       | t              | \$0.00            |   |                |
|     | or p<br>or ir<br>sep | ount. Do not include any benefits ayments received as a victim of nernational or domestic terrorism arate page and put the total belo  | a war crime, a crime<br>n. If necessary, list o   | e against humanity                       | /,             | \$3,057.13        |   |                |
|     |                      |  |   |  |                |                   |   |                |
|     | Tota                 | al amounts from separate pages,  | if any.   |  | +              |                   | +                                       |                |
| 11. |                      | culate your total average mont<br>l lines 2 through 10 for each colu   |   |  |                | \$3,057.13        | _+   :                                  | \$3,057.13     |
|     | The                  | n add the total for Column A to the  | ne total for Column I   | В.                                       | L              | +=,====           |   | Total average  |
|     |                      |  |   |  |                |                   |   | monthly income |
| Pa  | art 2                | Determine How to M   | leasure Your De   | eductions fror                           | n Income       |                   |   |                |
| 12. | Cop                  | y your total average monthly i   | ncome from line 11  | l  |                |                   |   | \$3,057.13     |
| 13. | Cal                  | culate the marital adjustment.   | Check one:  |  |                |                   |   |                |
|     |                      | You are not married. Fill in 0 be You are married and your spous You are married and your spous Fill in the amount of the income of you or your dependents, such than you or your dependents. Below, specify the basis for exceeding the processary, list additional adjust If this adjustment does not applied. | se is filing with you. se is not filing with y listed in line 11, Co h as payment of the cluding this income a ments on a separat | ou. Dlumn B, that was spouse's tax liabi | lity or the sp | oouse's support   | of someone other                        |                |
|     |                      |  |   | +  | <u> </u>       |                   |   |                |
|     |                      | Total  |   |  |                | \$0.00 Cop        | y here →                                | \$0.00         |
| 14  | You                  | ır current monthly income. Su  | htract the total in lin   | e 13 from line 12                        |                | <u></u>           |   | \$3,057.13     |

| Deb | otor 1 | Johnny E Barnes   | Case number (if known)   |
|-----|--------|---|--|
| 15. | Calc   | culate your current monthly income for the year. Follow these step  | os:  |
|     | 15a.   | . Copy line 14 here 😝   | \$3,057.13   |
|     |        | Multiply line 15a by 12 (the number of months in a year).   | X 12   |
|     | 15b.   | . The result is your current monthly income for the year for this part o  | f the form   |
| 16. | Calc   | culate the median family income that applies to you. Follow these s   | steps:   |
|     | 16a.   | . Fill in the state in which you live. Texa   | <u>s</u>   |
|     | 16b.   | . Fill in the number of people in your household1   |  |
|     | 16c.   | Fill in the median family income for your state and size of household<br>To find a list of applicable median income amounts, go online using<br>instructions for this form. This list may also be available at the bank | the link specified in the separate   |
| 17. | How    | v do the lines compare?   |  |
|     | 17a.   | Line 15b is less than or equal to line 16c. On the top of page of under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out C   | 1 of this form, check box 1, <i>Disposable income is not determined</i> alculation of Your Disposable Income (Official Form 122C-2). |
|     | 17b.   | Line 15b is more than line 16c. On the top of page 1 of this for 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation On line 39 of that form, copy your current monthly income from                           | of Your Disposable Income (Official Form 122C-2).  |
| Р   | art 3: | Calculate Your Commitment Period Under 11 U.S   | s.C. § 1325(b)(4)  |
| 18. | Сору   | by your total average monthly income from line 11.  | \$3,057.13   |
| 19. | that o | duct the marital adjustment if it applies. If you are married, your spot calculating the commitment period under 11 U.S.C. § 1325(b)(4) allow ome, copy the amount from line 13.  | · · · · · · · · · · · · · · · · · · ·  |
|     | 19a.   | . If the marital adjustment does not apply, fill in 0 on line 19a   | \$0.00   |
|     | 19b.   | . Subtract line 19a from line 18.   | \$3,057.13   |
| 20. | Calc   | culate your current monthly income for the year. Follow these step  | os:  |
|     | 20a.   | . Copy line 19b   | \$3,057.13   |
|     |        | Multiply by 12 (the number of months in a year).  | X 12   |
|     | 20b.   | . The result is your current monthly income for the year for this part o  | f the form. \$36,685.56  |
|     | 20c.   | . Copy the median family income for your state and size of household  | d from line 16c  |
| 21. | How    | v do the lines compare?   |  |
|     | ے ۔    | Line 20b is less than line 20c. Unless otherwise ordered by the court check box 3, <i>The commitment period is 3 years</i> . Go to Part 4.  | , on the top of page 1 of this form,   |
|     | _      | Line 20b is more than or equal to line 20c. Unless otherwise ordered of this form, check box 4, <i>The commitment period is 5 years</i> . Go to F   | · • •  |

| Part 4: Sign Below  By signing here, under penalty of perjury I declare that the  X /s/ Johnny E Barnes  Johnny E Barnes, Debtor 1 | Case number (if known)                            |   |
|--|---|---|
| Part 4:  | Sign Below  |   |
| By sigr  | ning here, under penalty of perjury I declare the | nat the information on this statement and in any attachments is true and correct. |
| <b>X</b> /s/   | Johnny E Barnes                                   | X   |
| Joh  | nnny E Barnes, Debtor 1                           | Signature of Debtor 2   |
| Dat  | te_ <b>6/14/2019</b>                              | Date  |
|  | MM / DD / YYYY                                    | MM / DD / YYYY  |

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

#### **Current Monthly Income Calculation Details**

In re: Johnny E Barnes Case Number:

Chapter: 13

#### 10. Income from all other sources not listed above.

| Debtor or Spouse's Income | Description (if available) |                    |                    |                    |                    |               |                      |
|---------------------------|----------------------------|--------------------|--------------------|--------------------|--------------------|---------------|----------------------|
|                           | 6<br>Months<br>Ago         | 5<br>Months<br>Ago | 4<br>Months<br>Ago | 3<br>Months<br>Ago | 2<br>Months<br>Ago | Last<br>Month | Avg.<br>Per<br>Month |

 Debtor
 VA INcome

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